

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # H22069

1. Entity Name
HUDSON INVESTMENT CORPORATION



Principal Place of Business
1303 WEST COLLEGE AVENUE
P.O. BOX 1023
RUSKIN, FL 33575

Mailing Address
1303 WEST COLLEGE AVENUE
P.O. BOX 1023
RUSKIN, FL 33575

FILED
Apr 06, 2005 08:00 AM
Secretary of State



DO NOT WRITE IN THIS SPACE

04022005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2448919
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUDSON, WALTER R.
1303 W. COLLEGE AVENUE
RUSKIN, FL 33570

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HUDSON, WALTER R.
STREET ADDRESS	1303 W. COLLEGE AVENUE
CITY-ST-ZIP	RUSKIN, FL
TITLE	D
NAME	HUDSON, BRUNY Z.
STREET ADDRESS	1303 W. COLLEGE AVENUE
CITY-ST-ZIP	RUSKIN, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/06/05-80063-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Walter R. Hudson WALTER R. HUDSON 4/2/05 813-645-6503
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #