FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1997		Secretary	Secretary of State DIVISION OF CORPORATIONS		Secretary of State	
1. Corporati		26 (5)				
Huppk	E WOODS, INC.				A NA DIGH AHA HITA DURI BUKA AKKA KKU BUDK ARAM DIGH AIDH AUDU BUDU BURU HAR	
Principal Prace of Business Mailing Address						
3264 LAKE PADGETT DRIVE PO BOX 218 LAND O'LAKES FL 34639 3264 LAKE PADGETT DRIVE PO BOX 218 LAND O'LAKES FL 34639-0218						
					3. Date Incorporated or Qualified 3a. Date of Last Report 07/16/1996	
Principal Place of Business 21		2a. Mailing Address 26			4. FEI Number Applied For 59-2456851 Not Applicat	
Suite, Ap	t.#, oto.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Regulred	
City & Sta	ale	City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	
Z(p 24	Country 25		Countr 30	У	8. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes System No	
	9. Name and Address of C	Current Registered Agent	81	Name	10. Name and Address of New Registered Agent	
BULLARD, F. TIMOTHY, CPA 5324 LAND O'LAKES BOULEVARD LAND O'LAKES FL 34639						
					ddress (P.O. Box Number is Not Acceptable)	
			83	<u></u>		
			84	1 7	FL 85 Zip Code	
11, Pursuan office or agent I	it to the provisions of Sections 60 registered agent, or both, in the am familiar with, and accept the	7.0502 and 607.1508, Florida Statute State of Florida. Such change was au obligations of, Section 607.0505, Flor	s, the about thorized to ida Statute	ve-named o by the corpo es.	orporation submits this statement for the purpose of changing its registers oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE					equired when reinstating) DATE	
12.	OFFICEF	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDT	☐ DELETE	1.1 TITLE	L	Change Additi	
NAME	HUPPKE, GLEN PAUL 3624 LAKE PADGETT DR		1.2 NAME	- 1		
STREET ADDRESS CITY: \$1-ZIP	LAND O'LAKES FL		1.4 CITY -	T ADDRESS		
TITLE	SDV	DELETE	21 TITLE		Change Addit	
NAME	HUPPKE, MARCELLA M.		2.2 NAME			
STREET AUDRESS			2.3 STREE	T ADDRESS		
CHY-ST-ZIP	LAND O'LAKES FL	DELETE	2. 4 CITY		Change Additi	
TITLE NAME		☐ necest	3.1 TITLE 3.2 NAME		Cuange L.J About	
STREET ADDRESS			•	T ADDRESS		
CITY-SI-7#			3.4. CITY	1		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addil	
NAMi			4. 2 NAM			
STREET ADDRESS	5			T ADDRESS		
CTY-ST-ZIP TITLE		DELETE	5.1 TITLE		Change Addit	
NAME		Lad Other	5.2 NAME	- 1	لين مسهد ليا مسهد	
STREET ADDRESS				T ADDRESS		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

CHY-ST 20

CITY - ST - 21P

TITLE

NAME STREET ADDRESS

DELETE

Change

Addition

FILED

Apr 09 1997 8:00am