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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # H52580

(8)

H & H DESIGN BUILDERS, INC.

**FILED** Feb 06 1997 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address				T HADYDII DINK BIING HEMD BENDI HANN DONI DIDIK BENDI BIRK DIDAK DIDIK DIDIK DODI			
PO BOX 669 WINDERMERE FL 34786-0668		PO BOX 668 WINDERMERE FL 34786-0668							
US						3. Date incorporated or Qualified 04/16/1985	1	te of Last 26/1996	Report
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number			applied For
21		26						lot Applicable	
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & Sta	te	City & State			6. Election Campaign Financing	\$5.00 May Be			
23		28	<del>-</del>			Trust Fund Contribution			to Fees
<i>Z</i> ip □ ]	Country	Zip	—	untry	1	8. This corporation has liability for			s. 199.032,
24	9. Name and Address of Curre	29 Agent	30	т		Florida Statutes L  10. Name and Address of New Re	Yes [		
LIA	YCOOK, DENNIS	iir vediarere Marir		81	Name	10. (talle alle Addiess el Pow III	Aleteren y	- Gent	
	320 BUTLER BAY COURT						·		
	NDERMERE FL 34788			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
***	IDEIGHETIE I E OTTOO			83					
				84	City			85 Zip	Code
			······	<u>L</u>	<u></u>	poration submits this statement for the tition's board of directors. I hereby acce	FL		
SIGNATURE	Signature, typed or printed name of rug stared ag	ent and title if applicable	(NOTE Registere			ired when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFFI	JERS ANL	Change	
TITLE NAME	HAYCOOK, DENNIS J.	[] DELCTE	1	IAME				FT CHAIRE	L_ Attuillo
STREET ADDRESS	ANNA BUTLED DAY OF				ADDRESS				
CITY- ST-ZIP	WINDERMERE FL				ST - ZIP				
TITLE	STD	DELETE	2.1 T	_	77-211			Change	Addition
NAME	HAYCOOK, SUZANNE M.		2.2 N	IAME					
STREET ADDRESS			2.3 \$	TREET	ADDRESS	<b>*</b> ***			
CITY - ST - ZIP	WINDERMERE FL			CiTY -	ST-21P				
TITLE	VD	☐ DELETE	3.1 T	ITLE				Change	Addition Addition
NAME	HAYCOOK, HAROLD J.		3.2 A	IAME					
STREET ADDRESS			3.3 \$	TREET	ADDRESS				
CITY - ST - ZIP	WINDERMERE FL	DELETE			ST-ZIP			Channa	1 4 ddition
TITLE	HAYCOOK, ANITA (ASST)	L] DELETE			·	•		Change	Addition
NAME CONCET ADODESC	40000 DUTT FD DAY OT			NAME	ADDOCCO				
STREET ADDRESS	WINDERMERE FL				ADDRESS				
CITY-ST-ZIP TITLE		DELETE			ST-ZIP			☐ Change	Addition
NAME		_		IAME				·	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					ST - ZIP				
TITLE		DELETE		_	<u> </u>			Change	Addition Addition
NAME			6.2 N	3MAS					
STREET ADDRESS	5		6.3 \$	TREE	ADDRESS				
CITY-ST-ZIP	•		6.4 (	HTY-S	ST- ZIP				

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 of supplier mental annual report is frue 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 12 if changed, or on an attentional with an address.

SIGNATURE:

Jan. 27, 1997