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 # J02069

(9)

HUTTO,	INC.	, ,					
Principal Place of Business Mailing Address 5635 54TH AVE. N. 2700 18T AVE. N ST. PETERSBURG FL 33709 ST. PETERSBURG US			FL 33713-8724		I (00171) PRI POPIA (701) SOPO OJIM POVI	JIBIH BIBN BIBN BIBN BIBN	l
					3. Date Incorporated or Qualified 03/03/1986	3a. Date of Last 04/11/1996	Report
······································	Place of Business	2a. Mailing Address			4. FEI Number		oplied For
21	H. est	26			59-2649193		lot Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	e	City & State			6. Election Campaign Financing		May Be
23 Zip					Trust Fund Contribution		to Fees
24	25	F1 ` I	Country 30	y	8. This corporation has liability for i	intangible tax under Yes No	s. 199.032,
[24]	9. Name and Address of Currer		[30]		10. Name and Address of New Re		
DEN	HAROT, JAMES W.		81	Name	10, 110,110,110,110,110,110,110,110,110,	Jidioi Oo rigotti	
2700 FIRST AVE. NO. ST. PETERSBURG FL 33713			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	<u></u> .
			83			H-1	
			84	City		FL 85 Zip	Code
	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with land accept the oblig	2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	es, the aboviouthorized by	e-named corp y the corpora s.	poration submits this statement for the p tion's board of directors. I hereby accep		its registered s registered
SIGNATURE	Signature typed or printed name of registered age	rol and hee if applicable 4NOTE	Registered Age	ant signature requi	red when reinstating)	DATE	
12.		D DIRECTORS	13.	an angratara ragar	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	VDS	DELETE	1.1 TITLE			Change	Addition
NAME	•		1.2 NAME				
STREET ADDRESS			1.3 STREET	T ADDRESS			
CITY-ST-2IF			1.4 CITY-S	ST-ZIP			
TITLE	WILLIAM HUGH HUTTO		2.1 TITLE			☐ Change	Addition
NAME			22 NAME				
STREET ADDRESS	5635 54TH AVENUE N.		2.3 STREET	T ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL		2. 4 CITY-	ST-ZIP		·····	
TITLE	DELETE 3.1 T		3.1 TITLE			Change	L Addition
NAME			3.2 NAME		•		
STREET ADDRESS			3.3 STREET	T ADDRESS			
CITY-ST-ZIP		DELETE	3.4. CITY-	ST-ZIP		[] A	4 4 4 4 9 1 1 1
TITLE		m nereit	4.1 TITLE			Change	Addition
NAME			4. 2 NAME]			
STREET ADDRESS			4.3 STREET				İ
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S 5.1 TITLE	ol-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			5.2 NAME	Ì		J Onange	AUGIDIT
STREET ADDRESS			5.3 STREET	ADDRESS	•		
CHY-ST-ZIP			5.4 CITY - S				
TITLE		DELETE	6.1 TITLE	21 - 411		Change	Addition
NAME		**************************************	6.2 NAME			tund Smilly	
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 City - S				

FILED Feb 17 1997 8:00am Secretary of State

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 ignitiangular or on an attachment with an address.

SIGNATURE: WILLIAM JULY JULY SIGNATURE AND TYPED OR FRIMED UNIE OF SIGNATURE AND TYPED OR FRIED UNIE OF SIGNATURE OF SIGNATURE AND TYPED OR FRIED UNIE OF SIGNATURE OF SI