FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

HUNTINGTON GROUP-ARCHITECTS, INC.



Principal Place of Business	of Business Mailing Address							
% WM. ROBERT HUNTINGTON % WM. ROBERT HUNTINGTON								
1001 3RD AVE W SUITE 350 BRADENTON FL 34205	1001 3RD AVE W SUITE 350 1001 3RD AVE W SUITE 350							
BRADENION PE 34200	DUVIENION LE 34500	BRADENTON FL 34205			3. Date Incorporated or Qualified 3a. Date of Last Report			
			i	08/29/1986	04/	18/199)5	
Principal Place of Business	2a. Mailing Address			4. FEI Number		1	Applied For	
21 330 5W. S. KWEN OR.	: 26 330 S.W. S	RIVER D	2K-1	59-2722331			Not Applicable	
Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional	
22 27 207 27 207						Fee F	Required	
City & State	City & State	一 二/		6. Election Campaign Financing Trust Fund Contribution			May Be	
23	Zip Zip	Country					lo Fees	
24 34997 25 MARTI	ا سيمرمرذم ⊏اير	30 MARTI	11	B. This corporation has liability for Florida Statutes Yes		inder s	199.032,	
9. Name and Address of Cur-	T 1771			10. Name and Address of New F		ent		
81 Name								
HUNTINGTON, WM. ROBERT (82) Street Address (P.O. Box Nuriber is Not Acceptable)								
1001 3RD AVE. W.	•	330	Sil	W. SOUTH RIVER	$\mathbb{Z}^{\prime}D\mathcal{L}$,			
SUITE 300	*	83 # 1	117					
BRADENTON FL-		84 City	<i>V</i> 7			85 Zip	Code	
			TUK	HET	FL !	34	1997	
 Pursuant to the provisions of Sections 607.05 or registered agent, or both, in the State of Fi 	302 and 607.1508, Florida Statutes,	the above-named con	rporatio	on submits this statement for the pu	pose of chang	ing its re	gistered office	
familiar with, and accept the obligations of, Si	ection 607.0505, Florida Statutes.	r by the corporation \$ t	ooaro o	orectors. Thereby accept the app	OHRITIOTIL AS TO	yistereu	agent, ram	
SIGNATURE W.M. EOBERT //// Signature, typed of printed name of registered as	UTINGTON PO				4.	- 16	-96	
		Registered Agent's gnature rec	quired whe		DATE	DEDTO		
12. OFFICERS A	AND DIRECTORS DELETE	13.	PD	ADDITIONS/CHANGES TO OFF		Change	Addition	
NAME HUNTINGTON, WM. ROBE		1.2 NAME	1'D	erialistral WIII De				
STREET ADDRESS 5111-17TH AVE.,W.		1.2 NAME	HUN	TINGTON, WH. RO. 5.W. SOUTH RI	ひをんり	Pill	E 1300	
CITY-ST-ZIP BRADENTON FL		1.3 STREET ADDRESS	330	110,000 F	OOH	W/ V		
TIPLE TS	↑ DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	ر برو مرمد	VART, FL 34	777	Change	☐ Addition	
NAME HUNTINGTON, AMELIA E.			ו נמנו	NTINGTON AUEL	IA E.			
STREET ADDRESS 5111-17TH AVE.,W.		2.3 STREET ADDRESS	721	SID. SEUTH RI	VERDI	CIVE	#207	
CITY-ST-ZiP BRADENTON FL		2.4 CITY-ST-ZIP	シナル	NTINGTON, AHEL ISIN, SOUTH RI IART FL. 34	9911			
TITLE	☐ DELETE	3 1 TITLE	~			Change	Addition	
NAME		3.2 NAME			_ 			
STREET ADDRESS		3.3 STREET ADDRESS						
CHY - ST - ZIP		3.4 CITY - ST - ZIP						
TITLE	☐ DELETE	4. 1 TITLE				Change	Addition	
NAME		4.2 NAME						
STREET ADDRESS		4.3 STREET ADDRESS						
C(1Y-S1-ZIP		4.4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·				
TITLE	☐ DELETE	5. 1 TITLE				Change	Addition	
NAME	•	5 2 NAME						
STREET ADDRESS		5 3 STREET ADDRESS						
CITY-ST-ZIP	□ prutte	54 CITY-ST-7IP			p-ru	<u> </u>		
TITLE	☐ DELETE	6 1 TITLE				Change	☐ Addition	
NAME		62 NAME						
STREFT ADDRESS		63 STREET ADDRESS						
14. I do hereby certify that the information supplie	d with this filing is voluntarily furnish	64 CiTY-ST-ZiP	ifu for th	ne exemption stated in Section 110	07/3V/k) Florida	Statute	as 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 expirector 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 changed, or on an attachment with an address.

AMELIA E. HUNTINGTON 4-16-96- 407-781-0457 **SIGNATURE**

CR2E034 (12/95)