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

Mailing Address

2545 SOUTH STREET LEESBURG FL 34748

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT #** J34761

1. Corporation Name

Principal Place of Business 2545 SOUTH STREET

LEESBURG FL 34748

HUGHES & BUTTERWORTH ADVERTISING, INC.

		•			3. Date Incorporated or Qualifed		
					09/24/1986	1 .	
2. Principal F	Place of Business	2a. Mailing Address	Mailing Address		4. FEI Number		ol ed For
21		26			59-2717908		t /\pplicable
Suite, Art.	. #, etc.	Suite, Apt. #, etc.	uite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A Fee Re	
22		27					<u> </u>
City & State City & State					6. Election Campaign Financing	\$5.00	
23	28			Trust Fund Contribution	Added t	o Fees	
Zip				ry	8. This corporation owes the current year lutan	.	[]No
24	25	29			Tersonii Troperty Tax.		
	9. Name and Address of Cu	rrent Registered Agent		41 11	10. Name and Address of New Registered Ag	ent	
b bs 14	NIED 10V0E		8	1 Name			
HUGHES, JOYCE				82 Street Address (P.O. Box Number is Not Acceptable)			
2545 SOUTH STREET							
LEE	SBURG FL 32748		8	3			i
			E	4 City	FL.	85 Zip (Ccde
office o	ito the provisions of Sections 607 registered agent, or both, in the Si am familiar with, and accept the ob	ate of Florida. Such change was a	authorized t	y the corpora	oporation submits this statement for the purpose of chainon's board of directors. I hereby accept the appointment	nent as re	gistered
SIGNATURE		NOT	T. Danisland A	ant signature man	red when reinstating) DATE		
12.	Signature, typed or printed name of registered	S AND DIRECTORS	13.	jent signature requ	ADDITIC NS/CHANGES TO OFFICERS / ND	DIRECTO	RS IN 12
TITLE	P	DELETE	1.1 TITLE	 		Change	Addition
	BUTTERWORTH, JAY		1.2 NAM				1
NAME				ET ADDRESS			
STREET ADDRES S				- 1			i
CITY-ST-ZIP	LEESBURG FL	DELETE	14 CITY			Change	Addition
TITLE	ST	☐ DELETE	2 1 TITL	- 1	•	0.10.190	
NAME	HUGHES, JOYCE		2.2 NAM	1			ĺ
STREET ADDRESS			2.3 STR	ET ADDRESS			
CITY-ST-ZIP	LEESBURG FL			-ST-ZIP		Change	Addition
TITLE		☐ DELETE	3.1 TITL		ľ	Change	
NAME			32 NAM	E			
STREET ADDRESS	s		3.3 STR	ET ADDRESS			
CITY-ST-ZIP			3.4. CIT	-ST-ZIP			
TITLE		☐ DELETE	4 1 TITL	:		Change	☐ Addition
NAME			4, 2 NAM	E			į
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP			4,4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL			Change	☐ Addition
NAME			5 2 NAM	E			
STREET ADDRESS			5.3 STR	EET ADDRESS			ľ

14. 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 recuired 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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRE IS

CITY-ST-ZIP

TITLE

NAME

☐ Change

☐ Addition

CR2E034 (11/98)

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90092 002 ***150.00

DO NOT WRITE IN THIS SPACE