FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 28 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K46865 (7)

1. Corporation Name
HUNTER & SONS, INC.

Principal Place of Business	Mailing Address
% HUNTER M. ARMENTROUT 4947 WHITE BLUFF DR JACKSONVILLE FL 32225	% HUNTER M. ARMENTROUT 4947 WHITE BLUFF DR JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/17/1988
3a. Date of Last Report: 04/28/1994
4. FEI Number: 59-2919093 — ☐ Applied For ☑ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 950-1 Blanding Blvd.	26 950-1 Blanding Blvd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Orange Park, FLA.	City & State 28 Orange Park, FLA.
Zip 24 32065 — Country 25 CLAY	Zip 29 32065 — Country 30 CLAY

9. Name and Address of Current Registered Agent

ARMENTROUT, HUNTER M.
4947 WHITE BLUFF DR
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name: Armentrout, Dale M.
82 Street Address (P.O. Box Number is Not Acceptable): 950-1 Blanding Blvd
83
84 City: Orange Park FL 85 Zip Code: 32065

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Armentrout, Dale - M. - President D. M. Armentrout 4/25/95

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	ARMENTROUT, HUNTER M.
STREET ADDRESS	4947 WHITE BLUFF DR
CITY ST ZIP	JACKSONVILLE FL
TITLE	D
NAME	ARMENTROUT, LUCILLE A.
STREET ADDRESS	4947 WHITE BLUFF DR
CITY ST ZIP	JACKSONVILLE FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1 1 TITLE	President - Director	☑ Change ☐ Addition
1 2 NAME	Armentrout, Dale M.	
1 3 STREET ADDRESS	950-1 Blanding Blvd.	
1 4 CITY ST ZIP	Orange Park, FLA 32065	
2 1 TITLE	Vice President - Director	☑ Change ☐ Addition
2 2 NAME	Armentrout, Daleen M.	
2 3 STREET ADDRESS	950-1 Blanding Blvd.	
2 4 CITY ST ZIP	Orange Park, FLA 32065	
3 1 TITLE	Vice President - Director	☑ Change ☐ Addition
3 2 NAME	Renfro, Robert	
3 3 STREET ADDRESS	950-1 Blanding Blvd.	
3 4 CITY ST ZIP	Orange Park, FLA 32065	
4 1 TITLE		☐ Change ☐ Addition
4 2 NAME		
4 3 STREET ADDRESS		
4 4 CITY ST ZIP		
5 1 TITLE		☐ Change ☐ Addition
5 2 NAME		
5 3 STREET ADDRESS		
5 4 CITY ST ZIP		
6 1 TITLE		☐ Change ☐ Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE: D. M. Armentrout — 4/25/95 — 904-272-4419
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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