Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90186 032 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

	MENI # K53439									
1. Corporatio	n Name									
HANUY	DUDLEY C.L.U., INCORPORA	AIED								
										B)
Principal Place of Business Mailing Address										
C/O RANDOLPH G. DUDLEY C/O RANDOLPH G. DUDLEY										
COCO PALM DRIVE. P.O. BOX 726 COCO PALM DRIVE. P.O. BOX BIG PINE KEY FL 33043-0726								DO NOT WRITE IN 1	THE COVCE	
BIG PINE KET	FL 33043	US P	PINE KEY FL 33043-07:	26				Date Incorporated or Qualifed	HIS STACE	
1		00					1	12/23/1988		
2 Principal P	face of Business	2a N	Mailing Address					FEI Number		Applied For
21	lace of Edsirioss	26	maining / tourcos				1	65-0092448	├	Not Applicable
Suite, Apt.	#. etc.		suite, Apt. #, etc.					00 0002440		5 Additional
22	.,,	27					5.	Certifcate of Status Desired		Required
City & Stat			City & State	·			6	Election Campaign Financing		00 May Be
23		28	,					Trust Fund Contribution		ed to Fees
Zip				Coun				This corporation owes the current year		
24	25	29	· .	30	.,			Personal Property Tax.	Yes	□No
24	9. Name and Address of Current			30 1				Name and Address of New Registe		
		<u> </u>		- 1	31	Name			<u> </u>	
DUDLEY, RANDOLPH G.										
COCO PALM DRIVE					32	Street Add	ldress (P.	O. Box Number is Not Acceptable)		
BIG PINE KEY FL 33043					33					
				{	34	City			FI 85 Zi	ip Code
11 Pursuant	to the provisions of Sections 607.0502	and 607	1508 Florida Statute	os the ahr	200-	named cor	moration			its registered
office or r	egistered agent, or both, in the State of	Florida.	Such change was au	thorized b	oy th	ne corporat	ition's boa	ard of directors. I hereby accept the a	pointment as	registered
agent. I a	m familiar with, and accept the obligation	ons of, Se	ection 607.0505, Flor	ida Statut	e s.			•		
SIGNATURE	Signature, typed or printed name of registered agent a	and title if an	policable (NOTE:	Registered A	aent i	signature requir	ired when rei	instating) DATE		
12.	OFFICERS AND		<u> </u>	13.	90	Signature respon		DDITIONS/CHANGES TO OFFICERS		TORS IN 12
TITLE	D	-	☐ DELETE	1.1 TITL	 E				☐ Chang	
NAME	DUDLEY, RANDOLPH G.			1 2 NAM	E					
STREET ADDRESS	P.O. BOX 726 COCO PALM D			13 STR	FET A	DDRES\$				
CITY-ST-ZIP	BIG PINE KEY FL			1.4 CITY						
TITLE			☐ DELETE	2.1 TITL		21		<u> </u>	☐ Chang	e Addition
NAME				2.2 NAM						_
STREET ADDRESS						DDRESS				
CITY-ST-ZIP				2.4 CITY						
TITLE			☐ DELETE	3.1 TITLE		ZIF			☐ Chang	e Addition
NAME			-	3.2 NAM						
STREET ADDRESS	-					DDRESS				
CITY-ST-ZIP				3.4. CITY						
TITLE			☐ DELETE	4.1 TITLE		ZIF			Chang	je
NAME				4. 2 NAM						
STREET ADDRESS						DDRESS				
CITY-ST-ZIP				4.4 CITY						
TITLE			☐ DELETE	5.1 TITLS				 -	☐ Chang	ie Addition
NAME				5.2 NAM						
STREET ADDRESS						DDRESS				1
CITY-ST-ZIP				5.4 CITY		J				ł
TITLE			☐ DELETE	6.1 TITLE		-			Chang	e Addition
NAME				6.2 NAM		ļ			4a.	
STREET ADDRESS						DORESS				

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP