

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # K53567 (9)

1. Corporation Name  
HUBBS DEVELOPMENT, INC.

Principal Place of Business  
885 BARTON BLVD. SUITE B  
ROCKLEDGE FL 32955

Mailing Address  
885 BARTON BLVD. SUITE B  
ROCKLEDGE FL 32955-3143

FILED  
May 06 1997 8:00am  
Secretary of State



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified  
12/27/1988

3a. Date of Last Report  
05/01/1996

4. FEI Number

59-2919658

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

9. Name and Address of Current Registered Agent

UNGAR, FRANCES L.  
1535 N COGSWELL ST A-3  
ROCKLEDGE FL 32955

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

P  
UNGAR, FRANCES L.  
1535 N COGSWELL ST A-3  
ROCKLEDGE FL 32955

TITLE NAME ☐ DELETE

EVP  
UNGAR, DAVID  
1535 N COGSWELL ST A-3  
ROCKLEDGE FL 32955

TITLE NAME ☐ DELETE

ST  
UNGAR, JODY  
1535 N COGSWELL ST A-3  
ROCKLEDGE FL 32955

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1A TITLE

1B NAME

1C STREET ADDRESS

1D CITY-ST-ZIP

2A TITLE

2B NAME

2C STREET ADDRESS

2D CITY-ST-ZIP

3A TITLE

3B NAME

3C STREET ADDRESS

3D CITY-ST-ZIP

4A TITLE

4B NAME

4C STREET ADDRESS

4D CITY-ST-ZIP

5A TITLE

5B NAME

5C STREET ADDRESS

5D CITY-ST-ZIP

6A TITLE

6B NAME

6C STREET ADDRESS

6D CITY-ST-ZIP

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 owner or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13a, changed, or on an attachment with an address.

SIGNATURE

*[Signature]*

N-29-87

CR2E034 (9/96)