SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(9)

FILED Jul 16 1998 8:00am Secretary of State

HURST F	PLAȘTERING, INC							
Principal Place	of Business	Malling Address	alling Address				DIN MINNY MENNY MENNY MINNY FINDA	
221 18TH AVEN	221 18TH AVENUE. NW	'H AVENUE, NW						
NAPLES FL 339	NAPLES FL 33999	. 33999			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified		
					•	01/11/1989		
2. Principal Pl	2a. Mailing Address	ailing Address			4. FEI Number	Applied For		
21		26				65-0098969	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	Α	27 City & State	City & State			6, Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip			intry		8. This corporation owes or has paid the cum			
24	25	29	30			Personal Property Tax due June 30.	Yes No	
	Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
MANTOR ACCOUNTING, INC.				81	Name			
4100 CORPORATE SQUARE				82	Street Addre	ress (P.O. Box Number is Not Acceptable)		
STE.			E					
NAPI	LES FL 33942				Oite		85 Zip Code	
				84	City	FL.	[·	
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 type of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating)								
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	Р	DELETE 1.1 TO		TLE			Change Addition	
NAME	HO(101), DITIMI		1.2 N/					
STREET ADDRESS	221 18TH AVE., NW		1.3 STREET ADDRESS		1			
CITY-ST-ZIP	NAPLES FL			1.4 CITY-ST-ZIP 2.1 TITLE				
TITLE	i percete		•			•	Change Addition	
NAME	HURST, TERRI		2.2 NAME 2.3 STREET ADDRESS		ADDDECC	·•	a r	
STREET ADDRESS	221 18TH AVE., NW Na p les fl	2.4 CiTY-ST-ZIP						
CITY-ST-ZIP	MAPLES FL	DELETE	3.1 TI		ZIF		Change Addition	
NAME		[_] procie	3.2 N			·	annuga to a constituti	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				TY-ST-				
TITLE		DELETE	4.1 TI				Change Addition	
NAME		_	4.2 N	AME	'			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				ITY-ST-	ZIP			
TITLE		L DELETE	5.1 TI				Change Addition	
NAME	•		5.2 N		••••			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		[] _{20,50}	5.4 C	ITY-ST-	ZIP		Change Addition	
TITLE		L DELETE	6.2 N		İ		Change Addition	
NAME OTOGET ADDRESS					ADDRESS			
STREET ADDRESS				ITY-ST-	J	·		
CITY-ST-ZIP			# 0.4 U		-1-1-1-1	140 07/0)(I) Florido Clatidos I fuebas costifici	that the information	

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.