

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L12733** (6)

1. Corporation Name

HURST CABLE, INC.



Principal Place of Business

**ROUTE 10, BOX 179
LIVE OAK FL 32060
US**

Mailing Address

**517 MARKET ST
OSAGE CITY KS 66523**

2. Principal Place of Business

2a. Mailing Address

21 **517 Market Street**
Suite, Apt. #, etc.
22 **P.O. Box 252**
City & State
23 **Osage City, Ks**
Zip Country
24 **66523** 25

3. Date Incorporated or Qualified

08/31/1989

3a. Date of Last Report

04/28/1995

4. FET Number

48-1080638

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**

6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**PELLICER, CHARLES E.
28 CORDOVA STREET
ST. AUGUSTINE FL 32084**

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 607.1509, 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 607.0504, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent or director

(Date) Registered Agent signature (typed or printed name)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	HURST, EARL A.	7518 S. A1A	ST. AUGUSTINE FL	☐
ST	GETSINGER, LINDA	517 MARKET	OSAGE CITY KS	☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	5. CHANGE	6. ADDITION
			ST. AUGUSTINE, FL 32086	☒	☐
			OSAGE CITY, KS 66523	☒	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

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:

Sandra B. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-1496

(913) 528-4705

CR2E034 (12/95)