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**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🕝 🔭

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

HARTLEY & SONS, INC.

## **FILED** May 19 1998 8:00am Secretary of State



| Principal Place               | of Business   | Mailing Address   |                                    | 1 100/1001 010 110/0 110/   | . 18811 88181 1813 81811 818           | II AIBII AIDII EIDII      | BIBIT SBB1   |
|-------------------------------|---|---|------------------------------------|---|--|---------------------------|--------------|
| N GARY HARTLEY -RI 3 BOX 2521 |   |   |                                    |   |  |                           |              |
| -2980 COLLEGE URIVE           |   | WILLISTON EL 32696  |                                    |   |  |                           |              |
| ST. AUGUSTINE FL 32065        |   | ∕us ~   |                                    |   | DO NOT WRITE IN THIS SPACE             |                           |              |
| ,                             |   |   |                                    | 3. Date Incorporated o 10/11/1989   | : Qualified                            |                           |              |
| 9 Principal Pl                | ace of Business   | 2a. Mailing Address   |                                    | 4. FEI Number   |  | IAD                       | plied For    |
| 21                            |   | 26 P.D. Box 325   |                                    |   |  |                           | t Applicable |
| Suite, Apt. #, etc.           |   | Suite Apt. #, etc.  |                                    |   | S8.75 Addition                         |                           |              |
| 22 17770 NE 7546 St           |   | 27 Williston Fr   |                                    | 5. Certificate of Status  | 5. Certificate of Status Desired       |                           | quired       |
| City & State                  | Miston Fr   | City & State  |                                    | 6. Election Campaign F<br>Trust Fund Contribut  |  | <b>\$5.00</b><br>Added to |              |
| Zip Country, Zip              |   |   | Country                            | B. This corporation owe   | s or has paid the cu                   | rrent year Inte           | angible      |
| 24 32696 25 USA 29 32696 30   |   |   | $o$ $\mathcal{USA}$                | Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent |  |                           |              |
|                               | 9. Name and Address of Current  | 10, Name and Address  | ot New Hegistered                  | Agent   |  |                           |              |
| HA                            | RTLEY, GARY   | Jary Hart   | Tey                                |   |  |                           |              |
| 82 Street Address             |   |   |                                    | ddress (P.O. Box Number is N  | ss (P.O. Box Number is Not Acceptable) |                           |              |
| A STANDOOMING TE OZOGO -      |   |   | 83 / 1//-/                         |   |  |                           |              |
| -                             |   |   | -   - · · · ·                      | Dillister   |  |                           | 3-40 -       |
|                               |   |   | 84 City                            |   | Fl                                     | _ 65 33                   | 1696         |
| 11. Pursuait t                | to the provisions of Sections 607.0502  | and 607.1508, Florida Statutes.   | , the above-named                  | corporation submits this statem   | ent for the purpose                    | of changing its           | s registered |
| office or re<br>agent. I ar   | egistered agent, or both, in the State of familiar with, and accept the obligat | of Florida, Such change was aut<br>tions of, Section <mark>607.0505</mark> , Florid | norized by the corp<br>da Statutes | ioration's doard of directors. I h  | эгеру ассері те ар                     | pointment as i            | registered   |
| SIGNATURE                     |   |   |                                    |   |  |                           |              |
|                               | Signature, typic d or punied name of icquistreed agree<br>OFFICERS AND          |   | Tugistered Agent signature         | required when reinstating)  ADDITIONS/CHANGE  | DATE<br>S TO OFFICERS AN               | ID DIRECTOR               | S IN 12      |
| 12.                           | PD OFFICE NO AND  | DELETE  |                                    |   | DUZSS                                  | Change                    | Addition     |
| NAME                          | HARTIEV CARVO   | <del></del>   | 1.2 NAME                           | P.O. Box 325  | NA                                     | - •                       | _            |
| STREET ADDRESS                | 2000 COLLEGE DAWE   | 70 NE75+1 St  |                                    | _   |  |                           |              |
| CITY-ST-ZIP                   | ST AUGUSTING FL 02005 W   | :11:starFz 32696  | 1.4.0.1Y-S1-ZIP                    | Williston Fr  | 32646                                  | 1                         |              |
| TITLE                         | SD  | DELETE  | 211011                             |   | .la                                    | Change                    | Addition     |
| NAME                          | HARTLEY, BRANDON  | N/A   | 22 NAME                            | P.O. B. 325   | 12/4.                                  |                           |              |
| STREET ADDRESS                | 2000 COLLEGE DRIVE  | In Sheetadows   | 2.3 STREET ADDRESS                 | Williston   |  |                           |              |
| CITY+ST-ZIP                   | ST_ALIQUETING=FE-B2095  |   | 2 4 CHY-ST-ZIP                     | Williston Pr  | 37676                                  |                           |              |
| TITLE                         |   | DELETE  | 31 TITLE                           |   |  | Change                    | Addition     |
| NAME                          |   |   | 3.2 NAME                           |   |  |                           |              |
| STREET ADDRESS                |   |   | 3.3 STREET ADDRESS                 |   |  |                           | -            |
| CITY-ST-ZIP                   |   |   | 3.4. CITY - ST - ZIP               |   |  |                           |              |
| TITLE                         |   | ☐ DELETE  | 4.1 TITLE                          |   |  | Change                    | ☐ Addition   |
| NAME                          |   |   | 4. 2 NAME                          |   |  |                           |              |
| STREET ADDRESS                |   |   | 4.3 STREET ADDRESS                 |   |  |                           |              |
| CITY-ST-ZIP                   |   |   | 4.4 CITY-ST-ZIP                    |   |  |                           |              |
| TITLE                         |   | ☐ DELETE  | 5.1 TITLE                          |   |  | L Change                  | Addition     |
| NAME                          |   |   | 5.2 NAME                           |   |  |                           |              |
| STREET ADDRESS                |   |   | 5.3 STREET ADDRESS                 |   |  |                           |              |
| CITY-ST-ZIP                   |   |   | 5.4 CITY-ST-ZIP                    |   |  | Channe                    | Addition     |
| TITLE                         |   | ☐ DELETE  | 6.1 TITLE                          |   |  | ☐ Change                  | Addition     |
| NAME                          |   |   | 6.2 NAME                           |   |  |                           |              |
| STREET ADDRESS                |   |   | 6.3 STREET ADDRESS                 |   |  |                           |              |
| CITY-ST-ZIP                   | certify that the information supplied wit                                       | L. Mic Chuc, door and micht -4  | 6.4 CITY-ST-ZIP                    | d in Section 110 07/9\/\)\ Florid   | a Statutae I further                   | partify that the          | information  |
| 14. Thereby o                 | ceruty that the information supplied will                                       | n this tiling does <b>got quality for !</b>   | me exemption state                 | a in section i 19.07(3)(1), Floridi   | a olatutes. I furtiner c               | Permis marine             | inionnation  |

indicated on this annual report or supplemental annual report is frue 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 of the receiver or trustee impowered 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 or an attachment with an address.