

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **M195347**

1. Corporation Name

H & R CONTRACTING, INC.

FILED

98 DEC 10 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

7115 Cove Place

Tampa FL 33617

Mailing Address

513 East Brentridge Drive

Brandon FL 33511

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

August 22, 1988

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

James H. Haney
7115 Cove Place
Tampa FL 33617

4. FEI Number

59-2934254

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

Lisa Guffey

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

513 East Brentridge Drive

84 City

Brandon

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

Lisa Guffey

(NOTE: Registered Agent signature required when reinstating)

11/24/98

12. OFFICERS AND DIRECTORS

TITLE **President** ☐ DELETE

NAME **James H. Haney**

STREET ADDRESS **7115 Cove Place**

CITY-ST-ZIP **Tampa FL 33617**

TITLE **Vice President** ☐ DELETE

NAME **Mary A. Haney**

STREET ADDRESS **7115 Cove Place**

CITY-ST-ZIP **Tampa FL 33617**

TITLE **Secretary/Treasurer** ☐ DELETE

NAME **Lisa A. Haney (nee Lisa Guffey)**

STREET ADDRESS **7115 Cove Place**

CITY-ST-ZIP **Tampa FL 33617**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President** ☒ Change ☐ Addition

1.2 NAME **Lisa Guffey**

1.3 STREET ADDRESS **513 East Brentridge Drive**

1.4 CITY-ST-ZIP **Brandon FL 33511**

2.1 TITLE **Vice President** ☒ Change ☐ Addition

2.2 NAME **James H. Haney**

2.3 STREET ADDRESS **7115 Cove Place**

2.4 CITY-ST-ZIP **Tampa FL 33617**

3.1 TITLE **Secretary/Treasurer** ☒ Change ☐ Addition

3.2 NAME **Mary A. Haney**

3.3 STREET ADDRESS **7115 Cove Place**

3.4 CITY-ST-ZIP **Tampa FL 33617**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

600002713356-4

-12/15/98-01085-001

*******61.25 *****61.25**

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Lisa Guffey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/24/98

Date

Daytime Phone #

CR2E034 (10/97)