

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005711

FILED  
Jun 02, 2005  
Secretary of State

Entity Name: HUGHES SUPPLY FAMILY FUND, INC.

**Current Principal Place of Business:**

ONE HUGHES WAY  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

ONE HUGHES WAY  
ORLANDO, FL 32805

**New Mailing Address:**

FEI Number: 55-0872476      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

HARRISON, MONROE  
ONE HUGHES WAY  
ORLANDO, FL 32805      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: HUGHES, DAVID H  
Address: ONE HUGHES WAY  
City-St-Zip: ORLANDO, FL 32805

Title: D      ( ) Delete  
Name: MORGAN, THOMAS I  
Address: ONE HUGHES WAY  
City-St-Zip: ORLANDO, FL 32805

Title: D      ( ) Delete  
Name: BEARMAN, DAVID  
Address: ONE HUGHES WAY  
City-St-Zip: ORLANDO, FL 32805

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC      ( ) Change (X) Addition  
Name: PARE, JOHN Z  
Address: ONE HUGHES WAY  
City-St-Zip: ORLANDO, FL 32805

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN Z. PARE

SEC

06/02/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date