

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000001865 (3)

1. Corporation Name

H.M. EXTENDED SERVICES INC.

Principal Place of Business

Mailing Address

1805 NW 31ST PLACE
GAINESVILLE FL 32605

PO BOX 141582
GAINESVILLE FL 32614-1582

APPROVED
AND
FILED
96 APR 26 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



3. Date Incorporated or Qualified

04/19/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1101 NW 39th AVE

26 Suite, Apt. #, etc.

22 A-4

27 Suite, Apt. #, etc.

23 Gainesville FL

28 City & State

24 32605

29 Zip

25 Alachua

30 Country

4. FEI Number

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 has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMAS, FRANCES R
5401 SW 82ND AVE
GAINESVILLE FL 32608

81 Name

82 Street Address (P.O. Box Number is Not Permitted) 600001797126

83 04/19/96--01008--012

84 City 122.50 61.25

85 Zip Code

FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

James Thomas

Frances Thomas

4-10-96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Change Addition

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7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-ST-ZIP

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8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-ST-ZIP

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9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-ST-ZIP

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10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY-ST-ZIP

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11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY-ST-ZIP

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12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY-ST-ZIP

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13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP

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14.1 TITLE 14.2 NAME 14.3 STREET ADDRESS 14.4 CITY-ST-ZIP

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15.1 TITLE 15.2 NAME 15.3 STREET ADDRESS 15.4 CITY-ST-ZIP

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16.1 TITLE 16.2 NAME 16.3 STREET ADDRESS 16.4 CITY-ST-ZIP

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17.1 TITLE 17.2 NAME 17.3 STREET ADDRESS 17.4 CITY-ST-ZIP

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18.1 TITLE 18.2 NAME 18.3 STREET ADDRESS 18.4 CITY-ST-ZIP

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19.1 TITLE 19.2 NAME 19.3 STREET ADDRESS 19.4 CITY-ST-ZIP

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20.1 TITLE 20.2 NAME 20.3 STREET ADDRESS 20.4 CITY-ST-ZIP

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21.1 TITLE 21.2 NAME 21.3 STREET ADDRESS 21.4 CITY-ST-ZIP

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22.1 TITLE 22.2 NAME 22.3 STREET ADDRESS 22.4 CITY-ST-ZIP

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23.1 TITLE 23.2 NAME 23.3 STREET ADDRESS 23.4 CITY-ST-ZIP

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24.1 TITLE 24.2 NAME 24.3 STREET ADDRESS 24.4 CITY-ST-ZIP

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25.1 TITLE 25.2 NAME 25.3 STREET ADDRESS 25.4 CITY-ST-ZIP

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26.1 TITLE 26.2 NAME 26.3 STREET ADDRESS 26.4 CITY-ST-ZIP

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27.1 TITLE 27.2 NAME 27.3 STREET ADDRESS 27.4 CITY-ST-ZIP

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28.1 TITLE 28.2 NAME 28.3 STREET ADDRESS 28.4 CITY-ST-ZIP

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29.1 TITLE 29.2 NAME 29.3 STREET ADDRESS 29.4 CITY-ST-ZIP

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30.1 TITLE 30.2 NAME 30.3 STREET ADDRESS 30.4 CITY-ST-ZIP

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31.1 TITLE 31.2 NAME 31.3 STREET ADDRESS 31.4 CITY-ST-ZIP

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32.1 TITLE 32.2 NAME 32.3 STREET ADDRESS 32.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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33.1 TITLE 33.2 NAME 33.3 STREET ADDRESS 33.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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34.1 TITLE 34.2 NAME 34.3 STREET ADDRESS 34.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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35.1 TITLE 35.2 NAME 35.3 STREET ADDRESS 35.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

36.1 TITLE 36.2 NAME 36.3 STREET ADDRESS 36.4 CITY-ST-ZIP

Change Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

37.1 TITLE 37.2 NAME 37.3 STREET ADDRESS 37.4 CITY-ST-ZIP

Change Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harold Miles

4-10-96

352-337-9391

Date

Daytime Phone

CR2E037 (12/95)