

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000013757

1. Entity Name
HUNTINGBURG MANAGEMENT CORPORATION



Principal Place of Business

**PO BOX 308
FT. MYERS, FL 33902**

Mailing Address

**PO BOX 308
FT. MYERS, FL 33902**

DO NOT WRITE IN THIS SPACE

FILED
Mar 17, 2006 08:00 AM
Secretary of State



03152006 No Chg-P CR2E034 (11/05)

4. FEI Number **65-0991109** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MC GEE, TODD D CPA
2040 VIRGINIA AVENUE
FORT MYERS, FL 33902**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HELMERICH, FRANK 5845 RIVERSIDE LANE FT MYERS, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD OLINGER, MAX 416 4TH STREET HUNTINGBURG, IN 47542
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OLINGER, LEE R 416 4TH STREET HUNTINGBURG, IN 47542
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03/28/06-80037-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #