

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000018789

1. Entity Name
HIGDON INDUSTRIES INCORPORATED



Principal Place of Business

**1703 FLORIDA AVE
QUINCY, FL 32351**

Mailing Address

**J. WARREN HIGDON III
PO BOX 430
QUINCY, FL 32353-0430**



02212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3632380

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HINSON, ALEXANDER L
121 N. MADISON ST
QUINCY, FL 32351**

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HIGDON, J WARREN III
STREET ADDRESS	P.O. BOX 1739
CITY-ST-ZIP	QUINCY, FL 323531739
TITLE	DST
NAME	HIGDON, JOSEPH W JR.
STREET ADDRESS	P.O. BOX 1739
CITY-ST-ZIP	QUINCY, FL 323531739
TITLE	DV
NAME	HIGDON, RALPH W
STREET ADDRESS	P.O. BOX 1739
CITY-ST-ZIP	QUINCY, FL 323531739
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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

J. Warren Higdon III

04-08-08

Date

(850) 627-7564

Daytime Phone #