

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 04, 2001 8:00 am  
Secretary of State

04-04-2001 90110 036 \*\*\*158.75

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DOCUMENT # P00000103066

1. Entity Name

H & H CONSTRUCTION ENTERPRISES, INC.

Principal Place of Business

1318 BOB CAT COURT  
APOPKA FL 32712

Mailing Address

PO BOX 1029  
APOPKA FL 32704-1029

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3681087

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SMALLEY, CRAIG W  
1527 E CONCORD STREET  
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name

Deborah J. Hall

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

1318 Bob Cat Court

City

Apopka

FL

Zip Code

32712

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.

SIGNATURE

Deborah J. Hall President

4/1/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	HURST, DEBORAH J	
STREET ADDRESS	1318 BOB CAT COURT	
CITY-ST-ZIP	APOPKA FL 32712	
TITLE	S	<input type="checkbox"/> Delete
NAME	HALL, RICHARD K	
STREET ADDRESS	1318 BOB CAT COURT	
CITY-ST-ZIP	APOPKA FL 32712	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Deborah J. Hall	
STREET ADDRESS	(married)	
CITY-ST-ZIP		
TITLE	V, S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hall, Richard K.	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Deborah J. Hall

Deborah J. Hall

4/1/01

(407) 464-0814

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Department of Health • Vital Statistics  
**STATE OF FLORIDA**  
**MARRIAGE RECORD**  
 TYPE IN UPPER CASE  
 USE BLACK INK

This license not valid unless seal of Clerk,  
 Circuit or County Court, appears thereon.

(STATE FILE NUMBER)

Orange Co FL 2000-0512169  
 12052000 11:29:02am  
 OR Bk 6143 Pg 2457

Recorded - Martha O. Haynie

MLO-00-0007474  
 (APPLICATION NUMBER)

**APPLICATION TO MARRY**

1. GROOM'S NAME (First, Middle, Last) <b>RICHARD KYLE HALL</b>			2. DATE OF BIRTH (Month, Day, Year) <b>02/09/1969</b>		
3a. RESIDENCE - CITY, TOWN, OR LOCATION <b>ORLANDO</b>	3b. COUNTY <b>ORANGE</b>	3c. STATE <b>FLORIDA</b>	4. BIRTHPLACE (State or Foreign Country) <b>CANADA</b>		
5a. BRIDE'S NAME (First, Middle, Last) <b>DEBORAH JEAN HURST</b>			5b. MAIDEN SURNAME (if different) <b>HOFFMAN</b>		
7a. RESIDENCE - CITY, TOWN, OR LOCATION <b>APOPKA</b>	7b. COUNTY <b>ORANGE</b>	7c. STATE <b>FLORIDA</b>	8. BIRTHPLACE (State or Foreign Country) <b>NEW JERSEY</b>		

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF GROOM (Sign full name using black ink) <i>Richard Kyle Hall</i>	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) <b>11/27/2000</b>
11. TITLE OF OFFICIAL <b>DEPUTY CLERK</b>	12. SIGNATURE OF OFFICIAL (Use black ink) <i>Deputy Clerk</i>
13. SIGNATURE OF BRIDE (Sign full name using black ink) <i>Deborah Jean Hurst</i>	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) <b>11/27/2000</b>
15. TITLE OF OFFICIAL <b>DEPUTY CLERK</b>	16. SIGNATURE OF OFFICIAL (Use black ink) <i>Deputy Clerk</i>

**LICENSE TO MARRY**


AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE <b>ORANGE</b>	18. DATE LICENSE ISSUED <b>11/27/2000</b>	18a. DATE LICENSE EFFECTIVE <b>11/30/2000</b>	19. EXPIRATION DATE <b>01/26/2001</b>
20a. SIGNATURE OF COURT CLERK OR JUDGE <i>Seamus W. Chapin</i>		20b. TITLE <b>CLERK OF THE CIRCUIT COURT</b>	

**CERTIFICATE OF MARRIAGE**

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) <b>11/27/2000</b>	22. CITY, TOWN, OR LOCATION OF MARRIAGE <b>Apopka</b>
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 23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>Seamus W. Chapin</i> 23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY <b>Seamus W. Chapin, Clerk of the Circuit Court</b> 23c. ADDRESS (Of person performing ceremony) <b>121 Primrose Dr. Longwood, FL</b>	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>Angela Roberts</i>
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>Butch</i>

**INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED**

26. SOCIAL SECURITY NUMBER	27. RACE	28. WERE YOU EVER PREVIOUSLY MARRIED?	29a. NO. OF THIS MARRIAGE	29b. LAST MARRIAGE ENDED BY (DEATH, DIVORCE OR ANNULMENT)	29c. DATE LAST MARRIAGE ENDED (Mo., Day, Year)
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STATE OF FLORIDA - COUNTY OF ORANGE  
 I HEREBY CERTIFY that this is a copy of the document as recorded in this office.  
 MARTHA G. HAYNIE, COUNTY COMPTROLLER  
 By *Valerie Nussbaumer*, D.C.  
 DATED: **12/5/00**

