

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000022511

1. Entity Name

L. R. HUGHES AUTO SALES, INC.



Principal Place of Business
5521 JACKSON BLUFF RD
TALLAHASSEE, FL 32310

Mailing Address
5521 JACKSON BLUFF RD
TALLAHASSEE, FL 32310



04032007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3703384

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HUGHES, L.R. JR
5521 JACKSON BLUFF RD
TALLAHASSEE, FL 32310

**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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000745374
05/18/07-80027-005 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME HUGHES, L.R. JR
STREET ADDRESS 5521 JACKSON BLUFF RD
CITY-ST-ZIP TALLAHASSEE, FL 32310

TITLE ST
NAME HUGHES, PAULA B
STREET ADDRESS 5521 JACKSON BLUFF RD
CITY-ST-ZIP TALLAHASSEE, FL 32310

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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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:

Paula B. Hughes

Paula B. Hughes

04/26/07

850 5801717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #