

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 13, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000103465

1. Entity Name  
HUGHES CARPENTRY INC



Principal Place of Business

993 WOODLAWN RD  
FREEPORT, FL 32439 US

Mailing Address

993 WOODLAWN RD  
FREEPORT, FL 32439 US



01032006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
51-0481217

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HUGHES, JACKIE  
993 WOODLAWN RD  
FREEPORT, FL 32439

**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	P
NAME	HUGHES, JACKIE
STREET ADDRESS	993 WOODLAWN RD
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	VP
NAME	MIDDLETON, CHRISTIAN
STREET ADDRESS	201 E COLLEGE BLVD E APT 49
CITY-ST-ZIP	NICEVILLE, FL 32578
TITLE	VP
NAME	SCHONES, JUSTIN L
STREET ADDRESS	201 COLLEGE BLVD E APT 38
CITY-ST-ZIP	NICEVILLE, FL 32578
TITLE	SEC
NAME	HUGHES, DORA L
STREET ADDRESS	993 WOODLAWN RD
CITY-ST-ZIP	FREEPORT, FL 32439
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000386196  
01/18/06-80047-024 150.00

**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:

*Jackie Hughes Jackie Hughes* 1-6-06 (850) 978-4186

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone