2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 08:00 A
Secretary of State

DOCUMENT # P03000140489

1. Entity Name
PAUL HUNT INC.

Principal Place of Business	Mailing Address
18544 11TH AVENUE ORLANDO, FL 32833	18544 11TH AVENUE ORLANDO, FL 32833

DO NOT WRITE IN THIS SPACE

01312008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-0452647	Not Applicable

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

6. Name and Address of Current Registered Agent

HUNT, PAUL
18544 11TH AVENUE
ORLANDO, FL 32833

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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	P
NAME	HUNT, PAUL
STREET ADDRESS	18544 11TH AVENUE
CITY-ST-ZIP	ORLANDO, FL 32833
TITLE	ST
NAME	HUNT, CARRIE
STREET ADDRESS	18544 11TH AVENUE
CITY-ST-ZIP	ORLANDO, FL 32833
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/14/08-80030-023 150.00

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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: _Paul Hunt_   Paul Hunt   1-31-08   407-568-4770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #