

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

APPROVED  
AND  
FILED

95 APR -7 AM 5:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P14166** (3)

1. Corporation Name  
**DAVID HITE, INC.**

Principal Place of Business  
**22437 FOUNTAIN LAKES BLVD.  
ESTERO FL 33928  
US**

Mailing Address  
**P. O. BOX 0000 1360  
ESTERO FL 33928  
US**

3. Date Incorporated or Qualified  
**04/23/1987**

3a. Date of Last Report  
**06/07/1994**

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24 Zip Country

4. FBI Number  
**31-0948412**

Applied For  
 Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

**HITE, JEAN  
22437 FOUNTAIN LAKES BLVD.  
ESTERO FL 33928**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (DATE)

| 12. OFFICERS AND DIRECTORS |                                   | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|-----------------------------------|---|---|
| TITLE                      | <b>VPD</b>                        | 1.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>HITE, DAVID</b>                | 1.2 NAME  |   |
| STREET ADDRESS             | <b>22437 FOUNTAIN LAKES BLVD.</b> | 1.3 STREET ADDRESS                                    |   |
| CITY, ST, ZIP              | <b>ESTERO FL</b>                  | 1.4 CITY, ST, ZIP                                     |   |
| TITLE                      | <b>PST</b>                        | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>HITE, JEAN</b>                 | 2.2 NAME  |   |
| STREET ADDRESS             | <b>22437 FOUNTAIN LAKES BLVD.</b> | 2.3 STREET ADDRESS                                    |   |
| CITY, ST, ZIP              | <b>ESTERO FL</b>                  | 2.4 CITY, ST, ZIP                                     |   |
| TITLE                      | <b>D</b>                          | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>HITE, JEAN</b>                 | 3.2 NAME  |   |
| STREET ADDRESS             | <b>22437 FOUNTAIN LAKES BLVD.</b> | 3.3 STREET ADDRESS                                    |   |
| CITY, ST, ZIP              | <b>ESTERO FL</b>                  | 3.4 CITY, ST, ZIP                                     |   |
| TITLE                      |                                   | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                   | 4.2 NAME  |   |
| STREET ADDRESS             |                                   | 4.3 STREET ADDRESS                                    |   |
| CITY, ST, ZIP              |                                   | 4.4 CITY, ST, ZIP                                     |   |
| TITLE                      |                                   | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                   | 5.2 NAME  |   |
| STREET ADDRESS             |                                   | 5.3 STREET ADDRESS                                    |   |
| CITY, ST, ZIP              |                                   | 5.4 CITY, ST, ZIP                                     |   |
| TITLE                      |                                   | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                   | 6.2 NAME  |   |
| STREET ADDRESS             |                                   | 6.3 STREET ADDRESS                                    |   |
| CITY, ST, ZIP              |                                   | 6.4 CITY, ST, ZIP                                     |   |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jean A. Hite* **Jean A. Hite, Pres** 4/3/95 913-947-8809

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Typed Name)