## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P19225

1. Corporation Name

HUSSMANN REALTY CO.

Principal Place of Business

Mailing Address

## FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90181 007 \*\*\*150.00



307 WEXFORD TERR VENICE FL 34293 US	PO BOX 1521 - 307 WEXFORD 12 FC VENICE FL 3424 3429 US		DO NOT WRITE IN THIS SPACE			
			3. Date incorporated or Qualifed 05/12/1988			
2. Principal Place of Business	2a. Mailing Address	•	4, FEI Number	Applied For		
m ·	26 307 WEXFORD	LERF	31-0644374	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State	· <b>L</b>	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip Cour 29 34143 30	utry U S	This corporation owes the current year in Personal Property Tax.	ntangible ☐ Yes X No		
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent			
HUSSMANN, JAMES C.		81 Name				
307 WEXFORD TERR	82 Street Addre		ss (P.O. Box Number is Not Acceptable)			
VENICE FL 34293		83				
,		84 City	F	L 85 Zip Code		
<ol> <li>Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation</li> </ol>	f Florida. Such change was authorized	by the corporation	ration submits this statement for the purpose of 's board of directors. I hereby accept the app	of changing its registered ointment as registered		

ayent. I a	III familiar with, and accept the obligations o	1, 0000011 007.0000, 1 10.11	ad Cididioo.				ļ
SIGNATURE	Signature, typed or printed name of registered agent and title	e if applicable. (NOTE: F	Registered Agent signature require	d when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			RS IN 12
TITLE	P	DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	HUSSMANN, JAMES C.	•	1.2 NAME				
STREET ADDRESS	307 WEXFORD TERR		1.3 STREET ADDRESS				
	VENICE FL		1.4 CITY-ST-ZIP				
CITY-ST-ZIP	ST	☐ DELETE	2.1 TITLE	<del></del>		☐ Change	Addition
	HUSSMANN, EDNA M.		2.2 NAME				
NAME	307 WEXFORD TERR		2.3 STREET ADDRESS				
STREET ADDRESS							
CITY-ST-ZIP	VENICE FL	- □ DELETE	2.4 CITY-ST-ZIP		_	Change	Addition.
TITLE '	VP :	- DELETE	.3.1 TITLE	• • • •		C. overígo	ا. ب <del>يقريقه ، 'ا</del>
NAME	HUSSMANN, JAMES M		3.2 NAME				
STREET ADDRESS	121 13TH ST		3.3 STREET ADDRESS				
CITY-ST-ZIP	EDWARDS CA		3.4. CITY-ST-ZIP				T Addition
TITLE	D	☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME	Hussmann, Darlene		4. 2 NAME				
STREET ADDRESS	121 13TH ST		4.3 STREET ADDRESS				
CITY-ST-ZIP	EDWARDS CA		4.4 CITY-ST-ZIP				
πιε		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
			64 CITY-ST-7IP				

14. 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 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, with all other like empowered.