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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999 	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P25204

1. Corporation Name

HWB OF ALABAMA, INC.

44-433-5724

Principal Place of Business

P.O. BOX 58291
BIRMINGHAM AL 35259-9291

Mailing Address

P.O. BOX 58291
BIRMINGHAM AL 35259-9291

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip County

28 Zip County

24 25 29 30 9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

07/11/1989

4. FEI Number

63-1004118

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes the current year tangible
Personal Property Tax. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name	JAMES P. PANICO, ATTY
82 Street Address (P.O. Box Number is Not Acceptable)	111 SOUTH MAITLAND
83 City	MAITLAND
84 FL	32951

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:

James P. Panico

James P. Panico

9/26/99

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETENAME
PSD
BAREFIELD, FRANK, JR.
100 CENTERVIEW DR., #171
BIRMINGHAM AL2. TITLE ☐ DELETENAME
TD
HEERSINK, MARNIX E.
2800 ROSS CLARK CIRCLE
DOTHAN AL3. TITLE ☐ DELETENAME
STREET ADDRESS
CITY-STATE-ZIP4. TITLE ☐ DELETENAME
STREET ADDRESS
CITY-STATE-ZIP5. TITLE ☐ DELETENAME
STREET ADDRESS
CITY-STATE-ZIP6. TITLE ☐ DELETENAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition11. TITLE ☐ Change ☐ Addition

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

21. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

31. TITLE ☐ Change ☐ Addition

32. NAME

33. STREET ADDRESS

34. CITY-STATE-ZIP

41. TITLE ☐ Change ☐ Addition

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP

51. TITLE ☐ Change ☐ Addition

52. NAME

53. STREET ADDRESS

54. CITY-STATE-ZIP

61. TITLE ☐ Change ☐ Addition

62. NAME

63. STREET ADDRESS

64. CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01(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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK BAREFIELD PRES 9/26/99 205823961

CR2E034 (11/98)

KE