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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P92000008804 (6)

1. Corporation Name

HUBER'S CONVENIENCE, INC.

Principal Place of Business

3605 N. LOCKWOOD RIDGE ROAD
SARASOTA FL 34234

Mailing Address

3605 N. LOCKWOOD RIDGE ROAD
SARASOTA FL 34234-6535



3. Date Incorporated or Qualified

11/24/1992

3a. Date of Last Report

10/14/1996

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

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4. FEI Number

65-0370268

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

KOLODZIEJ, MICHAEL
4918 PALM AIRE DRIVE
SARASOTA FL 34243

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

NAME KOLODZIEJ, MICHAEL

STREET ADDRESS 3605 N LOCKWOOD RIDGE ROAD

CITY- ST- ZIP SARASOTA FL

1.2 NAME

NAME HUBER, MOLLIE C

STREET ADDRESS 3605 N LOCKWOOD RIDGE ROAD

CITY- ST- ZIP SARASOTA FL

1.3 STREET ADDRESS

NAME HUBER, HAGAN H

STREET ADDRESS 3605 N LOCKWOOD RIDGE ROAD

CITY- ST- ZIP SARASOTA FL

1.4 CITY- ST- ZIP

NAME RASHID, GENE

STREET ADDRESS 3605 N LOCKWOOD RIDGE ROAD

CITY- ST- ZIP SARASOTA FL

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1.19 CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

NAME V.P. DECLAN E. HUBER

STREET ADDRESS 3804 N. LOCKWOOD RIDGE ROAD

CITY- ST- ZIP SARASOTA, FLORIDA

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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.

SIGNATURE:

Michael Kolodziej

3/30/97

941-3557541

0428003

CR2E034 (9/96)