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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 30 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P92000013353 (7)

HRDD, INC. Principal Place of Business Mailing Address 1478 S 6TH ST 1478 S 6TH ST MACCLENNY FL 32063 MACCLENNY FL 32083-8623 3. Date Incorporated or Qualified 3a. Date of Last Report 12/17/1992 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3155516 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & Stato \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Zin Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ARMENTROUT, DALE M 1478 S 6TH ST 82 Street Address (P.O. Box Number is Not Acceptable) MACCLENNY FL 32063 83 City 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, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (96/6) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change DELETE 1.1 TITLE Addition THE ARMENTROUT, DALE M 1.2 NAME NAME CR2E034 1478 S 6TH ST 1.3 STREET ADDRESS STREET ACORESS MACCLENNY FL 1.4 CITY - ST- ZIP CDY - S1 - ZiP DELETE Change Addition VPD 2.1 TITLE Till F ARMENTROUT, DARREN M 1 22 NAME MARK 1478 S 6TH ST STREET ADDRESS 2.3 STREET ADDRESS MACCLENNY FL CHY-\$1-7IP 2. 4 CITY - ST - ZIP **VPD** DELETE Change Addition DIL. 31 TITLE RENFRO, ROBERT 32 NAME 1478 S 6TH ST STREET ADDRESS 3.3 STREET ADDRESS MACCLENNY FL 3.4. CITY-ST-ZIP CUTY-ST-ZIP DELETE Change Addition 4.1 TITLE 84505 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS 44 CITY-ST-ZIP DELETE 51 TITLE ☐ Change Addition TILE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP C-11-51-7/P Addition DELETE Change TILE 6.1 TITLE 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY: \$1:20 14. I do hereby certify that the information supplied with this filling 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 enpowered to encure this report as required by Chapter 602. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an alignment with the address of the corporation of the corp