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PROFIT Corporation Annual Report

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000023119 (9)

HURST PROPERTIES, INC.

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Jul 02 1998 8:00am
Secretary of State



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Principal Place of Business Mailing Address 517 MARKET ST 517 MARKET ST OSAGE CITY KS 86523 OSAGE CITY KS 66523 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/26/1993 4. FEI Number 2. Principal Place of Business 2a, Mailing Address Applied For 59-3189760 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zıp Country 8. This corporation owes or has paid the current year Intangible 24 X Yes 25 29 30 Personal Property Tax due June 30. . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PELLICER, CHARLES E 28 CORDOVA ST 82 Street Address (P.O. Box Number is Not Acceptable) ST AUGUSTINE FL 32084 83 R4 City 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. Hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed naive of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE Change Addition TITLE 1.1 TITLE HURST, EARL 1.2 NAME **7518 A1A SOUTH** STREET ADDRESS 1.3 STREET ADDRESS ST AUGUSTINE FL 32084 CITY-ST-7IP 1.4 CHY-S1-7IP DELETE ☐ Change Addition TITLE 21 TITLE **HURST, FRANCEY** NAME 2.2 NAME 7518 A1A SOUTH STREET ADDRESS 2.3 STREET ADDRESS **ST AUGUSTINE FL 32084** 2. 4 CHTY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3.4. DITY - ST - ZIP DELETE 4 1 TITLE Change ☐ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 11TLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - \$1 - ZIP

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 supplied enter a mode 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: YIMA A MUNT

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