

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 # P93000023358

1. Corporation Name  
HUGHS PROPERTIES, INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 OCT 25 AM 9:36



DO NOT WRITE IN THIS SPACE

|  |  |  |  |
|--|--|--|--|
| Principal Place of Business<br>155 E 21ST STREET<br>JACKSONVILLE FL 32206                                    |  | Mailing Address<br>C/O DENNIS D FRICK<br>PO BOX 4667<br>JACKSONVILLE FL 32201<br>US  |  |
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip Country<br>24          |  | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip Country<br>29   |  |
| 9. Name and Address of Current Registered Agent<br>FRICK, DENNIS D<br>155 E 21ST ST<br>JACKSONVILLE FL 32206 |  | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>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 |                        | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                       |
|----------------------------|------------------------|---|-----------------------|
| TITLE                      | PD                     | 1.1 TITLE   |                       |
| NAME                       | HUGHS, JR N C          | 1.2 NAME  |                       |
| STREET ADDRESS             | 155 E 21ST ST          | 1.3 STREET ADDRESS                                    |                       |
| CITY-ST-ZIP                | JACKSONVILLE FL        | 1.4 CITY-ST-ZIP                                       |                       |
| TITLE                      | VPD                    | 2.1 TITLE   |                       |
| NAME                       | BAKER, II J D          | 2.2 NAME  | 500003033105          |
| STREET ADDRESS             | 155 E 21ST ST          | 2.3 STREET ADDRESS                                    | -11/02/99--01039--021 |
| CITY-ST-ZIP                | JACKSONVILLE FL        | 2.4 CITY-ST-ZIP                                       | ****150.00 ****150.00 |
| TITLE                      | T                      | 3.1 TITLE   |                       |
| NAME                       | CARLSON, RUGGLES B     | 3.2 NAME  |                       |
| STREET ADDRESS             | 155 E 21ST ST          | 3.3 STREET ADDRESS                                    |                       |
| CITY-ST-ZIP                | JACKSONVILLE FL        | 3.4 CITY-ST-ZIP                                       |                       |
| TITLE                      | S                      | 4.1 TITLE   |                       |
| NAME                       | FRICK, DENNIS D        | 4.2 NAME  |                       |
| STREET ADDRESS             | 155 E 21ST ST          | 4.3 STREET ADDRESS                                    |                       |
| CITY-ST-ZIP                | JACKSONVILLE FL        | 4.4 CITY-ST-ZIP                                       |                       |
| TITLE                      | D                      | 5.1 TITLE   |                       |
| NAME                       | BAKER, EDWARD L        | 5.2 NAME  |                       |
| STREET ADDRESS             | 155 E 21ST ST          | 5.3 STREET ADDRESS                                    |                       |
| CITY-ST-ZIP                | JACKSONVILLE FL        | 5.4 CITY-ST-ZIP                                       |                       |
| TITLE                      | TRE                    | 6.1 TITLE   |                       |
| NAME                       | JAMES JEFFREY GILSTRAP | 6.2 NAME  |                       |
| STREET ADDRESS             | 155 EAST 21ST STREET   | 6.3 STREET ADDRESS                                    |                       |
| CITY-ST-ZIP                | JACKSONVILLE FL 32206  | 6.4 CITY-ST-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 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:

*Dennis D. Frick*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis D. Frick, Secretary

1/5/99

355-1701