FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P93000084270 (6)

DOCUMENT #
1. Corporation Name HANSEN AND BOYD, INC.



Principal Place o	of Business	Mailing Address						
15025 SHARK STREET HUDSON FL 34667		15025 SHARK STREET HUDSON FL 34667		Date Incorporated or Qualified				
					12/09/1993	05/0	1/199	5
- 6: : 15:	A Fly signed	2a. Mailing Addres			4. FEI Number		T Ar	pplied For
-	be of Business	26			59-3225926		N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, 6	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22		City & State			6. Election Campaign Financing		\$5.00	May Be
City & State		28	n		Trust Fund Contribution	Added to Fees		
23	Country	Zip	T Cou	intry	8. This corporation has liability for	intangible tax u	nder s 1	199.032,
Zip	25	29	30	.,	Florida Statutes 🔣 Yes	□ No		
24	9. Name and Address of Currer			I	10. Name and Address of New F	tegistered Age	ent	
15025 S HUDSO	N, DOROTHY E. SHARK STREET N FL 34667 of the provisions of Sections 607.050.	2 and 607.1508, Florida	Statutes, the ab	81 Name 82 Street Addi 83 84 City Overnamed corpo	gold Jena	FL	ودا	i Code Code Gistered office agent. Lan
or registere familiar wit SIGNATURE	ed agent, or both, in the State of Flan h, and accept the obligations of State Signature daysed or printed name of registered ager	tion 607,05%, Florida S	Statutes	SydeCM of Agent a gnature, require	dululu od when reir statug)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF			
TITLE	PD	DELE	TE 1.1	TITLE		L	Change	☐ Addition
NAME	HANSEN, DOROTHY E		1.2 1	NAME				
STREET ADDRESS	15025 SHARK STREET		133	STHEET ADDRESS				
	HUDSON FL 34667		1.4	CITY-\$1-ZIP				
CITY-ST-ZIP TITLE	VSTD DELETE			TITLE			Change	Addition
	CHADWICK, BOYD E		22	NAME				
NAME	9019 JENA ROAD		23	STREET ADDRESS				
STREE! ADDRESS	SPRING HILL FL			CITY - ST - ZIP				
CITY-ST-ZIP TITLE	D DELETE			TITLE			Change	Addition Addition
NAME	CHADWICK, SUSAN J	P.		NAME				
1	9019 JENA ROAD			STREET ADDRESS				
STREET ADDRESS	SPRING HILL FL			CITY - S1 - ZIP				
CHTY-ST-ZIP	TOTALE TE			TITLE			Change	Addition
TITLE		<u>.</u>		NAME				
NAME				STREET ADDRESS				
STREET ADDRESS	}		1	CITY-\$1-ZIP				
CITY-ST-ZIP		DEL		TITLE			Change	Addition
TITLE		Γ] ψει		1				•
NAME				NAME				
STREET ADDRESS				STREET ADDRESS				
CITY-ST-ZIP				CITY - ST - ZIP			Change	Addition
TITLE		DEI		1 TATLE		L	Chango	
NAME				NAME				
STREET ADDRESS			6.3	STREET ADDRESS				
1			6.4	4 CITY - ST - ZIP				
CITY-ST-ZIP					for the eventation stated in Section 1:			don f. office

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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: