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Mailing Address

5413 US HWY 19

NEW PORT RICHEY FL 34652

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

NEW PORT RICHEY FL 34652

5413 US HWY 19



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 07 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000085933 (8)

HUNTER & HORTON, INC.

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/16/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3155426 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HORTON, RODNEY O 5413 US HWY 19 62 Street Address (P.O. Box Number is Not Acceptable) **NEW PORT RICHEY FL 34652 B4** 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature regulred when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Addition 1 1 TITLE Change **HUNTER, J MATTHEW** NAME 12 NAME **40 KELLY'S TRAIL** STREET ADDRESS 1.3 STREET ADDRESS OLDSMAR FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE HORTON, RODNEY O NAME 2.2 NAME 2557 LAKESIDE CT STREET ADDRESS 2.3 STREET ADDRESS PALM HARBOR FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an attackment within address.

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

61 TITLE

62 NAME

6.3 STREET ADDRESS

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

Change

Addition