FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

1998

P94000023486 (1)

DANNY HUGHES, INC.

DOCUMENT #

FILED Feb 12 1998 8:00am Secretary of State



Drinning Diggs	of Business		14	ilius Address							19110 1111 FOR
Principal Place of Business Mailing Address											
2265 CAPRI (NAPLES FL 3				2265 CAPRI COURT NAPLES FL 33942-2711							
THE LEG TE SOURCE THE				THE PLANTS OF STATE OF THE PERSON OF THE PER					DO NOT WRITE IN TH	HIS SPACE	
									3. Date Incorporated or Qualified		
		 							03/23/1994		
	Place of Busines	88	2a.	2a. Mailing Address					4, FEI Number		Applied For
21			26	· · · · · · · · · · · · · · · · · · ·					65-0478362		Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					6. Certificate of Status Desired		5 Additional Regulred
22 City & Stal			27	City & State							<u> </u>
23	ie			28					Election Campaign Financing Trust Fund Contribution		O May Be od to Fees
Zip	Zip ! Country			7(p Countr					8. This corporation owes or has paid the		
341				34105	30				Personal Property Tax due June 30.	Yes	□ No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
HUGHES, DANNY										 	
2265 CAPRI COURT							Charact	at Address (D.O. Boy Number is Not Assessable)			+
NAPLES FL 33942-2711						82	Street	treet Address (P.O. Box Number is Not Acceptable)			
MAPLEO PL 33942-2711						63					
						L.	L				
							85 Zip (ip Code	
11, Pursuarit	to the provision	ns of Sections 607.0	502 and 66	07.1508, Florida Statu	ites, the a	bove	e-named	corpo	ration submits this statement for the purpos	se of changing	g its registered
office or t	registered ager	nt, or both, in the St	ate of Florid	da Such change was , Section 607.0505, F	authorize	d by	y the corp	poratio	ration submits this statement for the purpos n's board of directors. I hereby accept the	appointment	as registered
_	piii +piiiing ++iii	, and accept the or	ilganoris oi	, ((()))	ionida ola	uic.	.				
SIGNATURE	Signature, typed or	proted name of registered	agent and title	rt applicable (NO	ITE Registere	d Age	ent signature	periuper e	when reinstating) DA'	re	-
12.				DIRI CTORS 13.					ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
TITLE	PVST			DELETE	1.1 Ti	ILF			\sqrt{P}	☐ Chang	8 Addition
NAME	HUGHES,	DANNY			1.2 N	AME		14	Iti ahos 1/000 Bie		
STREET ADDRESS				1.33			1.3 STREET ADDRESS		OLE TO		
CITY-ST-ZIP	NAPLES FL			1.4			1.4 CITY-ST-ZIP		all laborator		
TITLE				DELFTE	2.1 TI	TLE		1	tack	☐ Chang	e Addition
NAME					2.2 N	AME					
STREET ADDRESS					2.3 \$	REET	ADDRESS				
CITY-ST-ZIP					2.40	aty-:	ST - ZIP				
TITLE	1			DELETE	3.1 1					Chang	e Addition
NAME	1				3.2 N	AME					
STREET ADDRESS					3.3 \$	REET	ADDRESS				
CITY-ST-ZIP					3.4. 0	ary-:	ST-ZiP				
TITLE				☐ DELETE	4.1 TI	·····		1		Chang	e Addition
NAME					4.21	AME					
STREET ADDRESS	1				4.3 \$	REET	ADDRESS				
CITY-SI-ZIP							ST-ZIP				
TITLE	1			DELETE	5.1 TI			†	 	☐ Chang	e Addition
NAME	1				5.2 N					_	
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP	1						ST-ZIP				
TITLE	 			DELETE	6.11	-	,,-EH	 		☐ Chang	e Addition
NAME	ł			bad Fire 16	6.1 N						

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 eath; 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 13 if changed, or on an attachment with an address.

SIGNATURE: Valerie Hiches

STREET ADDRESS CITY-ST-ZIP

Merie thighes Jan 23-1998 941-434 0