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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000025931 (4)

1. Corporation Name
HT/BH, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 10 PM 1:19

Principal Place of Business
1111 S. ORANGE AVE., 4TH FL
ORLANDO FL 32806

Mailing Address
1111 S. ORANGE AVE., 4TH FL
ORLANDO FL 32806

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/05/1984

3a. Date of Last Report

4. FBI Number
59-3233061

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HANSON, HARLAN L
1111 S. ORANGE AVE., 4TH FL
ORLANDO FL 32806

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 resigning

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	HANSON, HARLAN L
STREET ADDRESS	1047 SWEETWATER RD
CITY - ST - ZIP	ORLANDO FL 32806
TITLE	D
NAME	TAYLOR, DAVID M
STREET ADDRESS	10317 RECLINATA LANE
CITY - ST - ZIP	TAMPA FL 33618
TITLE	D
NAME	HERBERT, GLENDO M
STREET ADDRESS	4170 SAXON DR.
CITY - ST - ZIP	NEW SMYRNA BEACH FL 32168
TITLE	D
NAME	BELLOMO, FRANK
STREET ADDRESS	3333 PELHAM RD
CITY - ST - ZIP	ORLANDO FL 32803
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply with the exemption in and in Section 110.07(3)(b), Florida Statutes. I further certify that the information included on this annual report is a true and accurate statement of the corporation's financial condition 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; the incorporation of the corporation is authorized by Chapter 007, Florida Statutes; and that my name appears in Block 12 on this filing.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Business mgr

President

Date

Chapter Number

1/27/95 407.839.1111