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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000052666 (2)**

1. Corporation Name

EDDIE HUGGINS LAND GRADING COMPANY



Principal Place of Business

**2535 WILLOUGHBY BLVD
STUART FL 34994
US**

Mailing Address

**PO BOX 1348
PALM CITY FL 34990
US**

2. Principal Place of Business

2a. Mailing Address

21

26

Street, Apt. #, etc.

Street, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Zip

Country

Country

24

29

9. Name and Address of Current Registered Agent

**HUGGINS, EDDIE
2535 WILLOUGHBY BLVD
STUART FL 34994**

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 607.0500 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. Thereby, as set forth in the appointment as registered agent, I am familiar with, and accept the obligation of, Section 607.0500, Florida Statutes.

SIGNATURE

Eddie Huggins, President

3/25/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	HUGGINS, EDDIE	
STREET ADDRESS	2535 WILLOUGHBY BLVD	
CITY, ST, ZIP	STUART FL	
TITLE	VS	☐ DELETE
NAME	NAYLOR, PETE	
STREET ADDRESS	2535 WILLOUGHBY BLVD	
CITY, ST, ZIP	STUART FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

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)(g), 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 this corporation or the receiver or trustee employed 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 after report with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eddie Huggins

3/25/96

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LOCAL FILE #

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