

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000074358 (0)

1. Corporation Name

MINT HILL, INC.



Principal Place of Business

Mailing Address

2910 KERRY FOREST PKWY., #A-10
TALLAHASSEE FL 32308

2910 KERRY FOREST PKWY., #A-10
TALLAHASSEE FL 32308

3. Date Incorporated or Qualified
10/11/1994

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 2930 Wellington Circle

26 2930 Wellington Circle

4. FEI Number

59-3274167

Applied For

Not Applicable

22 Suite 201

27 Suite 201

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

23 Tallahassee, FL

28 Tallahassee, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 32308

25 USA

29 32308

30 USA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOBBS, ROGER K
2910 KERRY FOREST PKWY., #A-10
TALLAHASSEE FL 32308

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
8559 Congressional Drive

83

84 City
Tallahassee

FL

85 Zip Code
32312

11. Pursuant to the provisions of Sections 607.0502 and 607.4508, 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

Roger K Hobbs
Signature (typed or printed name of registered agent also for if applicable)

VICARIES FROM

2-29-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSD ☒ DELETE
NAME BUFKIN, JOE
STREET ADDRESS 2910 KERRY FOREST PKWY., #A-10
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE D ☐ DELETE
NAME HOBBS, RONALD H
STREET ADDRESS 2910 KERRY FOREST PKWY., #A-10
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE VTD ☐ DELETE
NAME HOBBS, ROGER K
STREET ADDRESS 2910 KERRY FOREST PKWY., #A-10
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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 P/T/D
2.3 STREET ADDRESS 2930 Wellington Circle Suite 201
2.4 CITY-ST-ZIP Tallahassee, FL 32308

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME V/S/D
3.3 STREET ADDRESS 2930 Wellington Circle, Suite 201
3.4 CITY-ST-ZIP Tallahassee, FL 32308

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 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 oath; 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:

Roger K Hobbs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-29-96

Date

904-400-0040

Daytime Phone #

CR2E034 (12/95)