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

**PROFIT** CORPORATION **ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400087277 (7)

M. HUNTER CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

2009 WEEKS AVENUE

2009 WEEKS AVENUE

## **FILED** Apr 24 1998 8:00am Secretary of State



ORLANDO FL 32806 ORLANDO FL 32806 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 1707 N.Mills Ave. 21 1707 N. Mills Ave 59-3280892 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Orlando, Florida 28  $\Box$ Trust Fund Contribution Orlando. Florida Added to Fees 8. This corporation owes or has paid the current year Intangible 24 32803 25 25 Orange 29 32803 9. Name and Address of Current Registered Agent Personal Property Tax due June 30. **⊠** No 30 Yes 32803 Orange 10. Name and Address of New Registered Agent HUNTER, MIKE 81 Name 2009 WEEKS AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32806 83 84 City Zip Code 85 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 reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. **PVST** TITLE DELETE 1.1 TITLE Change Addition **HUNTER, MIKE** NAME 1.2 NAME **2009 WEEKS AVENUE** STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32806 CITY-ST-ZIP 14 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ☐ Change ☐ Addition HUNTER, MIKE NAME 2.2 NAME 2009 WEEKS AVENUE STREET ADDRESS 2.3 STREET ADDRESS **ORLANDO FL 32806** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETÉ 5.1 7ITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 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.