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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000039757 (6)

1. Corporation Name

LINDA A. HILL, INC.



Principal Place of Business

2402 PRAIRIE PLACE
LUTZ FL 33549

Mailing Address

2402 PRAIRIE PLACE
LUTZ FL 33549

2. Principal Place of Business

2a. Mailing Address

21 3906 Tampa Rd.

26 2402 Prairie Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 E

27

City & State

City & State

23 Oldsmar Florida

28 Lutz FLA

Zip

Zip

24 33647

25 USA

29 33549

30 USA

9. Name and Address of Current Registered Agent

HILL, LINDA A
2402 PRAIRIE PLACE
LUTZ FL 33549

3. Date Incorporated or Qualified
05/18/1995

3a. Date of Last Report
pending

4. FIC Number

59 331 7942

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

10. Name and Address of New Registered Agent

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 607.0525, Florida Statutes.

SIGNATURE *Linda A. Hill* Linda A. Hill, President

4/7/96

12. OFFICERS AND DIRECTORS

1. TITLE D ☐ DELETE

NAME HILL, LINDA A
STREET ADDRESS 2402 PRAIRIE PLACE
CITY, ST, ZIP LUTZ FL 33549

2. TITLE D ☐ DELETE

NAME HILL, THOMAS B
STREET ADDRESS 2402 PRAIRIE PLACE
CITY, ST, ZIP LUTZ FL 33549

3. TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. 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

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

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)(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: *Linda A. Hill* Linda A. Hill, President

4/7/96

813-949-
5919

CR2E034 (12/95)