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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 09 1997 8:00am

Secretary of State

Change

Davtime Phone #

Addition

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000054209 (8)

HUNT & PECK, INC.

CITY-ST-7IP

CITY ST-ZIP

SIGNATURE:

THEE

NAME STREET ADDRESS

Principal Place of Business Mailing Address 2050 CRANBERRY ISLE WAY 2050 CRAMBERRY ISLE WAY APOPKA FL 32712-2145 APOPKA FL 32712 3a. Date of Last Report Date Incorporated or Qualified 07/10/1995 03/22/1996 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 1400 Village Square Blvd. 1400 Village Square Blvd. 26 59-3327907 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Unit 3-195 Unit 3-195 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Tallahassee, FL Tallahassee, FL Trust Fund Contribution 28 Added to Fees 23 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 32312 32312 Leon Leon Yes X No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TARA FINANCIAL SERVICES, INC. 489 W. MINNEHAHA AVE. Street Address (P.O. Box Number is Not Acceptable) CLERMONT FL 34711 83 84 City 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 diapplicable (NOTE: Registered Agent signature required when reinstaling) (96/6) (6) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE X Change Addition 1.1 TITLE THE PD PD HUNTER, JEROLYN NAME **HUNTER, JERILYN** 1.2 NAME CR2E034 1400 VILLAGE SQUARE BLVD. UNIT 3-195 2050 CRANBERRY ISLE WAY 1.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE, FL 32312 APOPKA FL 32712 CITY - ST - ZIF 1.4 CiTY - ST - ZiE DELETE Change Addition 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - ST - 711 DELETE Change Addition THUE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY- \$1 - 21F Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition THLE 5.1 TITL€ NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP

DELETE

61 TITLE 62 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do 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 ghanged, or on an attachment with an address.