

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED. MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT # **P95000057818 (3)**
 1. Corporation Name

HUSSEY, INC.



Principal Place of Business: **1811 80TH STREET COURT WEST BRADENTON FL 34209**
 Mailing Address: **1811 80TH STREET COURT WEST BRADENTON FL 34209**

3. Date Incorporated or Qualified: **07/26/1995**
 3a. Date of Last Report: []
 4. FEI Number: **65-0599698**
 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. 190.032 Florida Statutes: [] Yes [X] No

2. Principal Place of Business: **21 2845 Don Quixote Dr.**
 Suite, Apt. #, etc.: []
 22. []
 City & State: **23 Punta Gorda, FL**
 Zip: **33950** Country: **USA**
 24. **FL** 25. **USA**
 2a. Mailing Address: **26 2845 Don Quixote Dr.**
 Suite, Apt. #, etc.: []
 27. []
 City & State: **28 Punta Gorda, FL**
 Zip: **33950** Country: **USA**
 29. **33950** 30. **USA**

9. Name and Address of Current Registered Agent:
HUSSEY, JOHN B JR.
1811 80TH STREET COURT WEST
BRADENTON FL 34209

10. Name and Address of New Registered Agent:
 81 Name: []
 82 Street Address (P.O. Box Number is Not Acceptable): **2845 Don Quixote Dr.**
 83 []
 84 City: **Punta Gorda** FL 85 Zip Code: **33950**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 line for principal place of business and the registered agent, if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	HUSSEY, BRENDA L	
STREET ADDRESS	1811 80TH STREET COURT WEST	
CITY - ST - ZIP	BRADENTON FL 34209	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Hussey Brenda L	
1.3 STREET ADDRESS	2845 Don Quixote Dr.	
1.4 CITY - ST - ZIP	Punta Gorda, FL 33950	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Brenda L Hussey**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-8-96 944-505-1225

CR2E034 (3/96)