

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. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000065845 (6)  
1. Corporation Name

PHILLIPS, HUNTER & ASSOCIATES, INC.



Principal Place of Business

Mailing Address

5420 BLUE TICK DRIVE  
ORLANDO FL 32810

5420 BLUE TICK DRIVE  
ORLANDO FL 32810

3. Date Incorporated or Qualified  
08/24/1995

3a. Date of Last Report

4. FEI Number  
59-3333892

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

HUNTER, BARBARA  
5420 BLUE TICK DRIVE  
ORLANDO FL 32810

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 607.0505, Florida Statutes.

SIGNATURE: *Barbara Hunter - BARBARA HUNTER*

(NOTE: Registered Agent signature required when re-registering)

7/31/96  
DATE

12. OFFICERS AND DIRECTORS

TITLE DS  
NAME HUNTER, BARBARA  
STREET ADDRESS 5420 BLUE TICK DRIVE  
CITY - ST - ZIP ORLANDO FL 32810 ☐ DELETE

TITLE CEO  
NAME HUNTER, BARBARA  
STREET ADDRESS 5420 BLUE TICK DRIVE  
CITY - ST - ZIP ORLANDO FL 32810 ☐ DELETE

TITLE DV  
NAME HUNTER, K R  
STREET ADDRESS 5420 BLUE TICK DRIVE  
CITY - ST - ZIP ORLANDO FL 32810 ☐ DELETE

TITLE DV  
NAME PARKER, HARVEY  
STREET ADDRESS 2830 LAUREL WAY  
CITY - ST - ZIP MOUNT DORA FL 32751 ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP ☐ Change ☐ Addition

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP ☐ Change ☐ Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP ☐ Change ☐ Addition

41 TITLE Sandym Brabham DV ☒ Change ☐ Addition  
42 NAME 1035 KELLY CIRCLE  
43 STREET ADDRESS DUNED, FL 32705  
44 CITY - ST - ZIP

51 TITLE DV ☐ Change ☒ Addition  
52 NAME HELEN SUE URBAN  
53 STREET ADDRESS 9 CASSIN LANE  
54 CITY - ST - ZIP DEBARY, FL 32713

61 TITLE ST ☐ Change ☒ Addition  
62 NAME VIVIAN G. ROSA  
63 STREET ADDRESS 209 SOUTH MOSS ROAD  
64 CITY - ST - ZIP WINTER SPRINGS, FL 32708

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Barbara Hunter - BARBARA HUNTER*

Date:

7/31/96

Daytime Phone #

248-4185

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR