FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P95000079990 (4)

corporation trame	
HAUFFE CONSTRUCTION	I, INC.

Principal Place	of Business	Mailing Address			-)) OBKK OBIH 18940 19440 50		
7005 REDONDO DRIVE 7005 REDONDO DRIVE PENSACOLA FL 32526 PENSACOLA FL 32526								
					 Date Incorporated or Qualified 10/13/1995 	3a. Date of Last F	Report	
<u> </u>	coe of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For	
21 700		26			59-334-818	·	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired Section Status Desired Fee Required			
City & State City & State 28 City & State 28					Election Campaign Financing Trust Fund Contribution		00 May Be ad to Fees	
Zip 24 3252	Country 25 () S.A-	Zip 29	Country 30		8. This corporation has liability for Florida Statutes Yes			
	9. Name and Address of Current				10, Name and Address of New R			
			81	Name				
HAUFFE	, RANDY		82	Dt 1 A-1-1	/DO Bar Number le Not A			
7005 REDONDO DRIVE				Street Adores	Street Address (P.O. Box Number is Not Acceptable)			
PENSAC	OLA FL 32526		83					
			84	City		FL 85 Zi	ip Code	
	of the provisions of Sections 607.0502 and agent, or both, in the State of Florid th, and accept the obligations of, Section			amed corporatoration's board	tion submits this statement for the pur of directors. I hereby accept the appr	roops of shapping its	registered office 1 agent. I am	
SIGNATURE _	, , , , , , , , , , , , , , , , , , , ,	The state of the s						
Oldinations	Signature, typed or printed name of registered agent a		NOTE: Registered Agent	Signature required v	when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO)RS IN 12	
TITLE	D	☐ DELETE	1. 1 TITLE	P/·	T/0	Change	Addition	
NAME	HAUFFE, RANDY		1.2 NAME	HAC	of Redundo Dr			
STREET ADDRESS	7005 REDONDO DRIVE		1.3 STREET	ADDRESS 70	os Redundo Pr			
CITY-ST-ZIP	PENSACOLA FL 32526		1.4 CITY - ST		sacola Fl 32526			
TITLE		• DELETE	2 1 TITLE	V/		Change	Addition	
NAME			2.2 NAME	(ઉંહ	linda Page			
STREET ADDRESS			23 STREET	ADDRESS 70	linda Page os Redondo or		ì	
CITY-ST-ZIP		D BEITT	2 4 CITY-ST	-ZIP PUN	15acola F1 32526			
TITLE		☐ DELETE	3 1 TITLE	V		Change	Addition	
NAME			3.2 NAME	100	iamiah Snell 136 N PAU'S HWY			
STREET ADDRESS			3.3. STREET					
CITY - ST - ZIP TITLE		☐ DELETE	3.4 CITY-ST	-21P P-2.	nsacola F1 32503		F-1 11:00	
NAME			4. 1 TITLE			☐ Change	Addition	
STREET ADDRESS			4.2 NAME					
CITY-ST-ZIP			4.3 STREET A					
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	4.4 CITY - ST 5. 1 TITLE	- ZIP		☐ Change	Addition	
NAME		- Detter	5.2 NAME			□ cuange	☐ Addition	
STREET ADDRESS			5.3 STREET A	INDRESS				
CITY-ST-ZIP								
TITLE		☐ DELETÉ	5 4 CITY - ST 6 1 TITLE	- ¢1P		☐ Change	Addition	
NAME.		₩ 	62 NAME			- Charge		
STREET ADDRESS			63 STREET	innerec				
CHTY-ST-ZIP				- 1				
	pertify that the information a realized w	tale abile #1 - 1 - 1 - 1 - 1 - 1	6.4 C(TY - ST	- 217		12.2		

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 ir formation indicated on this annual report or supplementa 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 or Block 14 or no an attachment with an address.

SIGNATURE:

RANDY HAUFFE 7-24-96