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Jan 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000001077 (2)

1. Corporation Name  
HALL FAMILY ENTERPRISES, INC.

Principal Place of Business  
1535 N THIRD STREET  
JACKSONVILLE FL 32233  
US

Mailing Address  
1535 N THIRD STREET  
JACKSONVILLE FL 32250-7351  
US



2. Principal Place of Business

21 1948 BRISTA DE MAR CIR.

Suite, Apt. #, etc.

22 City & State

23 ATLANTIC BEACH, FL

24 Zip

32233

Country

25 USA

2a. Mailing Address

26 1948 BRISTA DE MAR CIR.

Suite, Apt. #, etc.

27 City & State

28 ATLANTIC BEACH, FL

29 Zip

32233

Country

30 USA

3. Date Incorporated or Qualified  
12/22/1995

3a. Date of Last Report  
05/01/1996

4. FEI Number

59-3354017

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

9. Name and Address of Current Registered Agent

ALTERMAN, LEONARD M  
9116 CYPRESS GREEN DRIVE  
JACKSONVILLE FL 32258

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

Allen Hall, Pres.

ALLEN HALL, PRES.

12/7/97

(Signature typed or printed name of officer or director if not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME HALL, ALLEN  
STREET ADDRESS 1948 BRISTA DE MAR CIRCLE  
CITY - ST - ZIP ATLANTIC BEACH FL

TITLE ST ☐ DELETE

NAME HALL, TASHA  
STREET ADDRESS 1948 BRISTA DE MAR CIRCLE  
CITY - ST - ZIP ATLANTIC BEACH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ 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 does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included 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:

Allen Hall, Pres.

ALLEN HALL, P.

1/7/97

904  
246-0035

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

0038916

CR2E034 (9/96)