FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

CITY-ST-ZiP

DOCUMENT # P9600003347

HEWITT-RIFE CONSTRUCTION FOILIPMENT, INC.

Principal Place 3839 CR 48 OKAHUMPKA FI		Mailing Address P.O. BOX 490697 LEESBURG FL 34749-0697				
					3. Date Incorporated or Qualified 3a. D. 01/08/1996	ate of Last Report
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	h	26			59-3367916	Not Applicable
Suite Apt.	# OIC	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State		, ,	6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zιρ	Gountry	Žip	Coun	try	8. This corporation has liability for intangible	tax under s. 199.032,
24	25	29	30		Florida Statutes	
	9. Name and Address of Curren	t Registered Agent	-	Name	10. Name and Address of New Registered	Agent
RICHEY, STEVEN J			'	Name		
1084 FLAGLER AVENUE LEESBURG FL 34748			1	Street Add	dress (P.O. Box Number is Not Acceptable)	
LEEK	SDUNG FL 34/46		-	33		
				~		
			[City	F1	85 Zip Code
11. Pursuant office or ragent La	to the provisions of Sections 607.050; egistered agent, or both, in the State im famúar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was alions of, Section 607.0505, F	tes, the abo authorized lorida Statu	ove-named cor by the corpora tes.	rporation submits this statement for the purpose o ation's board of directors. I hereby accept the app	of changing its registered pointment as registered
	Signature, typed or printed name of registered age			Agent signature requ	uired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS ANI	
TITLE	HEWITT, HOWARD H	☐ DÉLETE	1.1 (1)(1)			Change Addition
NAME STREET ADDRESS	P.O. BOX 490697 N/A		1.2 NAA	EET ADDRESS		
	LEESBURG FL 34749-0697					
CITY - ST - ZIP TITLE	V	DELETE	2 1 TITE	r-\$T-ZIP		Change Addition
NAME	RIFE, DANIEL F		2.2 NAA			
STREET ADDRESS	P.O. BOX 490697 N/A		2.3 \$TR	EET ADDRESS	·	•
CITY - ST - ZIP	LEESBURG FL 34749-0697		2 4 CIT	Y-ST-ZIP		
THILE	1	DELETE	3 1 TITL	E		Change Addition
NAME	HAWES, HARRY W		3.2 NAM	1E.		
STREET ADDRESS	P.O. BOX 490697 N/A		3 3 STR	EET ADDRESS		
CITY - ST - 7IP	LEESBURG FL 34749-0697			Y-ST-ZIP		
TITLE		L) DELETE	4 1 TITL	E		Change Addition
NAME			4 2 NA	ME		
STREET ADDRESS			4.3 STR	EET ADDRESS		,
CITY - ST - ZIP		Drifte		r-ST-ZIP		Change Addition
TITLE		☐ DELETE	517171			Change Addition
NAME			5.2 NAA]		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZP TITLE		DELETE	5.4 CIT	r-ST-ZIP		Change Addition
NAME			6.2 NAM			Li rioditori
PERCET ARRESCO				EET ADDRESS		

6.4 CITY - ST- ZIP

14. I do hereby certily 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 changed, or on an expanding the manaderess. Havard H. Havit 1-13-97 **SIGNATURE:**

FILED

Jan 22 1997 8:00am

Secretary of State