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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # nanga (a)

rincipal Place of Business	Mailing Address	
112 W NEW HAVEN AVE	112 W NEW HAVEN AVE	
MELBOURNE FL 32901	MELBOURNE FL 32901	

FILED Mar 09 1998 8:00am Secretary of State

1. Corporation Name HUDDLESTON & PALUMBO,	P.A.			
Principal Place of Business Mailing Address		_		
112 W NEW HAVEN AVE MELBOURNE FL 32901	112 W NEW HAVEN AV MELBOURNE FL 32901	Æ		
WELDOOMINE PE SENDI	MELPOURINE FL 32801		DO NOT WRITE IN TH	IIS SPACE
			3. Date Incorporated or Qualified 06/10/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3384204	Not Applicable
Suite, Apt. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	
24 25	29	30	Personal Property Tax due June 30.	Yes No
g, Name and Address of C	Current Registered Agent		10. Name and Address of New Register	ed Agent
Palumbo, Catherine B		81 Name		
112 W NEW HAVEN AVE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
MELBOURNE FL 32901		83		
		63		
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 60 office or registered agent, or troth, in the agent. I am familiar with, and accept the	97.0502 and 607.1508, Florida Statu State of Florida. Such change was obligations of, Section 607.0505, F	tes, the above-named corp authorized by the corporat lorida Statules.	oration submits this statement for the purposi ion's board of directors. I hereby accept the a	e of changing Its registered appointment as registered
SIGNATURE Signature typoid or printed name of registe	ered agent and title diapphorable (NO	TE Registered Agent signature requir	ed when reinstating) DAT(\
12. OFFICER	RS AND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE D	☐ DELETE	1 1 TITLE		Change Addition
NAME HUDDLESTON, M. PAM		1.2 NAME		Į;
STREET ADDRESS 112 W NEW HAVEN AV	rt.	1.3 STREET ADDRESS		
CITY-ST-ZIP MELBOURNE FL 32901	- Delega	1.4 CITY-ST-ZIP		
TITLE D	☐ DELETE	21 TITLE		Change Addition
NAME PALUMBO, CATHERINE STREET ADDRESS 112 W NEW HAVEN AV		2.2 NAME		
MELBOUDHE EL AMAL		2.3 STREET ADDRESS		
TITLE MELBOURNE FL 32901	DELETE	2 4 CITY-ST-2iP 3.1 TITLE		Change Addition
NAME	tend State 11	3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		1
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADORESS		
CITY-\$I-ZIP		5.4 City-St-ZiP		
TITLE	☐ DECETE	6.1 TITL€		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6 4 CITY-S1-ZIP	Section 119.07(3)(i), Florida Statutes. I further	

in the country for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the country is the and victorate and that my signature shall have the same legal effect as if made under oath; that I am an or frustry empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in cut with an address.

SIGNATURE: