


**FILED**  
**Apr 22, 1999 8:00 am**  
**Secretary of State**

04-22-1999 90164 025 \*\*\*150.00

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT # P96000068517**

1. Corporation Name

**FAR&R INVESTMENTS, INC.**

Principal Place of Business

**C/O JAMES NEAL HUTCHINSON, JR.**  
**5200 S WASHINGTON AVE**  
**TITUSVILLE FL 32780**  
**US**

Mailing Address

**C/O JAMES NEAL HUTCHINSON, JR.**  
**5200 S WASHINGTON AVE**  
**TITUSVILLE FL 32780**  
**US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/14/1996**

2. Principal Place of Business

**21 1249 Hardee Rd**

Suite, Apt. #, etc.

**22 Second Floor**

City &amp; State

**23 Coral Gables FL**

Zip

**24 33146**

Country

**25 US**

2a. Mailing Address

**26 1249 Hardee Rd**

Suite, Apt. #, etc.

**27 Second Floor**

City &amp; State

**28 Coral Gables FL**

Zip

**29 33146**

Country

**30 US**

4. FEI Number

**65-0686495**

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional Fee Required**

6. Election Campaign Financing

☐**\$5.00 May Be Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax.

☒ Yes☐ No

9. Name and Address of Current Registered Agent

**HUTCHINSON, JAMES NEAL JR.**  
**5200 S WASHINGTON AVE**  
**TITUSVILLE FL 32780**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**1249 Hardee Road**

83

84 City

**Coral Gables****FL**

85 Zip Code

**33146**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETENAME **DP HUTCHINSON, JAMES NEAL JR.**STREET ADDRESS **5200 S WASHINGTON AVE**CITY-ST-ZIP **TITUSVILLE FL**TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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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 ☐ Addition1.2 NAME **DP Hutchinson, James Neal, Jr**1.3 STREET ADDRESS **1249 Hardee Road**1.4 CITY-ST-ZIP **Coral Gables, FL 33146**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 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

James Neal Hutchinson, Jr

5/3/99

Date

941-925-2500

Daytime Phone #

CR2034 (1/1/98)