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**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine, Marris

Secretar State

DIVISION OF CORPORATIONS

DOCLMENT # P96000077622

1. Corporation Name

HINOTE COMMONS, INC.

Principal Place of Business

Mailing Address

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90132 046 \*\*\*150.00

	aird Road			43 Laird	RU.						
Crest	view, Fl	L 32539	9	Crestview	, FL	32539		DO NOT WRI	TE IN THIS	SPACE	
							3 Date Inco	rporated or Qualifed	TE IIV (FII )	GFACE	
2. Principal Pla	ace of Business		ı	2a. Mailing Address			4. FEI Numb	<u>)6/96</u>			
11			26							pplied For	
Suite, Ap . #, etc.			Suite, Apt. #, etc.			<u>59-3400234</u>				ot Applicable	
22				27 Suite, Apt. #, etc.		5. Certifca e	5. Certicale of Status Desired 1.1			Additional equired	
City & State				City & State		•	6. Election C	6. Election Campaign Financing		<b>\$5.00</b> May Be	
31				28			Trust Fun	d Contribution		Added	to ees
Zip Country			Zip Country		untry	8. This corporation owes the current year Ir tangible					
4	25			29 30			Personal Property Tax.			Yes [No	
	9. Name and Ad	dress of Cur	rent It	egistered Agent		1	10. Name an	d Address of New R	Registerec	Agent	
3.3761.77						81 Name					
	R, DARLA					82 Street Ad	doress (P.O. Box IJi	umber is Not Accepta	nhla)		
	CRANE C		۷D.	•		Ou cours	3C1C33 (1 .O. DOX 14	amper is Not Accepta	ibic)		
GULF	BREEZE,	FL 3	3256	51		83					
						84 City			FI.	85 Zip	Code
1 Pursuan to	the provisions of	Sections 607 0	)502 ±1	nd 607.1508, Florida S	tatutes the s	hove-named co	privaration submits the	nis statement for the		changing its	re listered
office or reg	gistered agent, or t	ooth, in the Sta	ate of =	Florida. Such change w is of, Section 607.0505	as authorize	d by the corpora	at on's board of di⊧e	ctors. I hereby accep	t the appoin	ntment as re	gistered
IGNATURE	Ignature, typed or printed	nami- of registered a	agentaio	d title if applicable. (	NOTE: Registered	d Agent signature requ	uir id when reinstating)		DATE		
<u>SI</u>	Ignature, typed or printed	of registered a			NOTE: Registered	d Agent signature requ		S/CHANGES TO OFF		D DIRECTO	DRS IN 12
2.		C FFICERS	AND 3		13.			S/CHANGES TO OFF		D DIRECTO	ORS IN 12
2. TLE <b>P/</b> (5)	ANGER,	C FFICERS .	J.	DIRECTORS DELET	13. E 11TI	ITLE		S/CHANGES TO OFF			
2. TLE <b>P/D</b>	ANGER, 1107 CR	CFFICERS DARLA RANE CO	J. VE	DIRECTORS  DELETI  BLVD.	13. E 11TI	ITLE AME		S/CHANGES TO OFF			
2.  TILE P/D  TILE P/D  THE REET ADDRESS	ANGER,	CFFICERS DARLA RANE CO	J. VE	DIRECTORS DELET	13. E 11TI 12N 1.3S	ITLE AME TREET ADDRESS		S/CHANGES TO OFF			
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Z. TLE P/D  WME  REET ADDRESS TY-ST-ZIP  TLE  WME  TREET ADDRESS TY-ST-ZIP  TLE  WME  TY-ST-ZIP  TLE  WME  REET ADDRESS TY-ST-ZIP  TLE  WME  REET ADDRESS TY-ST-ZIP  TLE  WME	ANGER, 1107 CR	CFFICERS DARLA RANE CO	J. VE	BLVD. 32561  DELETI DELETI	E 11TI 12N 13S 14C E 21TI 22N 23S 2.4C E 3.1TI 4.2N 33S' 34.C E 4.1TI 4.2N 4.3S' 4.4CI	ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  TREET ADDRESS  ITY-ST-ZIP  TLE  IAME  ITREET ADDRESS  ITY-ST-ZIP  TLE  IAME  ITREET ADDRESS  ITY-ST-ZIP		S/CHANGES TO OFF		Change	Addition Addition
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SIGNING OFFICER UR DIRECTOR