

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90087 007 ***150.00

DOCUMENT # P97000000342

1. Entity Name

J.L. HURT, INC.



Principal Place of Business

201 E. PINE STREET
SUITE 1500
ORLNADO, FL 32801

Mailing Address

201 E. PINE STREET
SUITE 1500
ORLNADO, FL 32801

2. Principal Place of Business - No P.O. Box #

201 E. PINE STREET

3. Mailing Address

201 E. PINE STREET

Suite, Apt. #, etc.

SUITE 1500

Suite, Apt. #, etc.

SUITE 1500

03292007

Chg-P

CR2E034 (12/06)

City & State

ORLANDO, FL

City & State

ORLANDO, FL

4. FEI Number

59-3419757

Applied For

Not Applicable

Zip
32801

Country

Zip
32801

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HURT, JENNINGS L III
201 E. PINE STREET
SUITE 1500
ORLNADO, FL 32801

7. Name and Address of New Registered Agent

Name

HURT, JENNINGS L III

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

201 E. PINE STREET

SUITE 1500

City

ORLANDO

FL

Zip Code

32801

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME HURT, JENNINGS L III
STREET ADDRESS 201 E. PINE STREET
CITY-ST-ZIP ORLNADO, FL 32801

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME HURT, JENNINGS L III
STREET ADDRESS 201 E. PINE STREET
CITY-ST-ZIP ORLANDO, FL 32801

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-17-07

407 839 0120