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Secretary of State

07-06-1999 90011 027 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>P97000061136</u>					
1. Corporation Name <u>Ray Hutchinson, Inc.</u>					
Principal Place of Business <u>412 S.W. 7th COURT</u> <u>BOXTON BEACH, FL 33435</u>			Mailing Address <u>412 S.W. 7th COURT</u> <u>BOXTON BEACH, FL 33435</u>		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 21 <u>412 SW. 7th COURT</u>			2a. Mailing Address 26 <u>412 SW. 7th COURT</u>		
22 Suite, Apt. #, etc.			27 Suite, Apt. #, etc. <u>SAME</u>		
23 City & State <u>BOXTON BEACH FL</u>			28 City & State <u>SAME</u>		
24 Zip <u>33435</u>			29 Country <u>WEST PALM</u>		
25 Country <u>WEST PALM</u>			30		
3. Date Incorporated or Qualified			4. FEI Number <u>65-0788291</u>		
5. Certificate of Status Desired <input type="checkbox"/>			Applied For <input type="checkbox"/>		
6. Election Campaign Financing <input type="checkbox"/>			Not Applicable <input type="checkbox"/>		
7. Trust Fund Contribution <input type="checkbox"/>			\$8.75 Additional Fee Required		
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No			\$5.00 May Be Added to Fees.		
9. Name and Address of Current Registered Agent <u>Ray Hutchinson</u> <u>412 S.W. 7th COURT</u> <u>BOXTON BEACH, FL 33435</u>			10. Name and Address of New Registered Agent		
81 Name			82 Street Address (P.O. Box Number is Not Acceptable)		
83			84 City		
85 Zip Code			FL		
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 <u>Ray Hutchinson</u> DATE <u>4/29/99</u>					
(NOTE: Registered Agent Signature required when reappointing)					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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: Ray Hutchinson **DATE:** 4/29/99 **Daytime Phone #** (561) 733-5639

CR2E034 (11/98)