

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 02, 2004 8:00 am
Secretary of State

07-02-2004 90004 021 ***158.75

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1. Entity Name
HUCKABEE INVESTMENT PLANNING SERVICES, INC.



Principal Place of Business
**805 DOUGLAS AVE STE 159
ORLANDO, FL 32803-3832 US**

Mailing Address
**805 DOUGLAS AVE
STE 159
ALTAMONTE SPRINGS, FL 32714**

54059709



2. Principal Place of Business
**613 N. Wymore Rd
Suite, Apt. #, etc.
Winter Park, Florida**

3. Mailing Address
**613 N. Wymore Rd
Suite, Apt. #, etc.
Winter Park, Florida**

06302004 Chg-P CR2E034 (10/03)

City & State
32789 USA

4. FEI Number
59-3498427

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HUCKABEE, CHARLES C
123 ZELMA STREET
STE A
ORLANDO, FL 32803-3832**

7. Name and Address of New Registered Agent

Name **Huckabee, Charles C.**
Street Address (P.O. Box Number is Not Acceptable)
613 N. Wymore Rd
City **Winter Park** FL Zip Code **32789**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **HUCKABEE, CHARLES C**
STREET ADDRESS **123 ZELMA STREET STE A**
CITY-ST-ZIP **ORLANDO, FL 328033832**

TITLE **D** ☒ Delete
NAME **HOCKAER, CHARLES C**
STREET ADDRESS **805 DOUGLAS AVE STE 159**
CITY-ST-ZIP **ALTAMONTE SPRINGS, FL 32714**

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 ☒ Change ☐ Addition
NAME **Huckabee, Charles C**
STREET ADDRESS **613 N. Wymore Rd**
CITY-ST-ZIP **Winter Park, FL 32789 (D)**

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 exemption stated in Section 119.07(3)(i), 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 an address, with all prior like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #