FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90092 016 ***150.00

DOCUMENT # P9700063697

1. Corporation Name

HUNTER-MAHR & ASSOCIATES, INC.

Principal Place	of Business	Mailing Address		, , <u>, , , , , , , , , , , , , , , , , </u>	
2431 ALOMA AVE., STE. 264 WINTER PARK FL 32789 2431 ALOMA AVE., STE. 264 WINTER PARK FL 32789				DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualifed	
]				07/22/1997	
2 Principal Pl	ace of Business	2a. Mailing Address		4, FEI Number	Applied For
21 1455		26 P.O. BOX	2-11	59-3476405	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	lberry FL	City & State 28 Winter Po	- K EL	6, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Country	Zip	Country	8. This corporation owes the current yea	
Zip		29 32190 3	,	Personal Property Tax.	☐ Yes ☐ No
24 327	9. Name and Address of Currer		<u> </u>	10. Name and Address of New Register	red Agent
	S. Halle Blid Abdition of California		81 Name	2 1 1 5 00 - 1	· · · · · · · · · · · · · · · · · · ·
MEAGHER, RICHARD F				Kichard F. (1) eagher address (P.O. Box Number is Not Acceptable)	
2431 ALOMA AVE., STE. 264				2.4 Chi angula Tani	
WINT	TER PARK FL 32789		83		
			24 20		85 Zip Code
}			84 City	aitland 1	FL 85 Zip Code 32.751
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with and accept the obliga	of Florida /Such change was auti	horized by the corpol	corporation submits this statement for the purpos ration's board of directors. I hereby accept the a	e of changing its registered
SIGNATURE	Signature, typed or printed name of registered ege	carh Richar	1 6		1arch 19,1999
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	DPS	DELETE	1.1 TITLE		Change Addition
NAME	HUNTER, DEEDRA B	•	1.2 NAME		
STREET ADDRESS	2431 ALOMA AVE., STE. 264		1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		1.4 CITY-ST-ZIP		
TITLE	DVT	☐ DELETE	2.1 TITLE	PTS 10 Marshar	Change
NAME	MEAGHER, RICHARD F		22 NAME	Richard F. Meagrer	
STREET ADDRESS	2431 ALOMA AVE., STE. 264		2.3 STREET ADDRESS	Richard F. Meagher 2124 Chippens Trail Maitland FL 32751	
CITY-ST-ZIP	WINTER PARK FL 32789		2.4 CITY-ST-ZIP	Maitland, FL 32751	
TITLE :	-	☐ DELETE	3.1 TITLE	ومسور بريو	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Charles Charles
πιε		☐ DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4,3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	-	
TITLE		☐ DELETE	5,1 TITLE		☐ Change ☐ Addition

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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

[] Change

☐ Addition