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

**CORPORATION** ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000081804 (1)

RICK HANSON ENTERPRISES, INC.

Principal Place of Business	Mailing Address	
500 S BELCHER LARGO FL 33771	500 S BELCHER LARGO FL 33771	

## **FILED** May 04 1998 8:00am Secretary of State



Principal Place	e or Business	Mailing Address			Į.			
500 S BELCHER LARGO FL 33771		500 S BELCHER LARGO FL 33771						
		DANGO FE SSIVI			DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporated or Qualified			
					09/19/1997			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			59-3467431		Not Applicab	
		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional	
22		27			8. Certificate of Status Desired	Fee	Required	
City & State	9	City & State			6. Election Campaign Financing	\$5.0	00 May Be	
3		[28]			Trust Fund Contribution	Add	ed to Fees	
<b>Z</b> ip	Country	Zφ	Country	У	8. This corporation owes or has paid the	he current year	Intangible	
24	25	29	30		Personal Property Tax due June 30.		□ No	
	g, Name and Address of Curr	ent Registered Agent			10. Name and Address of New Regist	ered Agent		
WA	TKINS, CARL T		81	Name				
	5 JACKSON SPRINGS RD #3	1	62	Street Add	dress (P.O. Box Number is Not Acceptable)			
	MPA FL 33634			) Oliver Alea	27635 (F.S. BOX Harrioti la Hot Piocopitolo)			
			83					
			-			12-1-5		
			64	City		FL  85   2	ip Code	
11. Pursuant t	a the previous of Continue CO7.0	CO2 and CO7 1500 Florida Ctat	uton the shou	lo persod cor	poration submits this statement for the purpo		a ita ragiatara	
SIGNATURE		ito of Florida Such change wai ligations of, Section 607.0505,				·		
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (N	OTE Registered Ag		uired when reinstating) (2	PATE		
SIGNATURE	Signature, typed or printed name of registered of OFFICERS A	ayed and title if applicable (N	OTE: Registered Ag			S AND DIRECT		
SIGNATURE 12.	Signature typed or printed name of registered OFFICERS A	agent and title if applicable (N	OTE: Registered Ag		uired when reinstating) (2			
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of this armost report of supprendents amount report is true and accurate and that my signature shall have the same legal effect as if made under dath; that I am a officer or director of the corporation or the frequency 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 op an attachment with an address.

4-26-58