## 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** 

## DOCUMENT # **P97000087543**1. Corporation Name

HUCKLEBERRY BUILDERS, INC.

## **FILED** Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90045 047 \*\*\*150.00



| Principal Place of Business                     |   | Mailing Address                                 |                                    |   |   |  |            |
|---|---|---|------------------------------------|---|---|--|------------|
| 7401 VERNA-BETHANY ROAD<br>MYAKKA CITY FL 34251 |   | 7401 VERNA-BETHANY ROAD<br>MYAKKA CITY FL 34251 |                                    |   | ÷   |  |            |
|   |   |   |                                    | DO NOT WRITE IN THIS SPACE  |   |  |            |
|   |   |   |                                    | 3. Date Incorporated or Qualifed  |   |  |            |
|   |   |   |                                    | 10/10/1997  |   |  |            |
| 2 Principal Pla                                 | ace of Business                                   | 2a. Mailing Address                             | <del></del>                        | 4. FEI Number   | App   | lied For                                   | *::        |
| 21  | <b></b>   | 26  |                                    | 65-0786594  | Not   | Applicable                                 |            |
| Suite, Apt. i                                   | #, etc.   | Suite, Apt. #, etc.                             |                                    | 5. Certificate of Status Desired  | \$8.75 A  | 1  |            |
| 22  | ,   | 27  |                                    | 5. Certificate of States Besides  | Fee Rec   | uired                                      |            |
| City & State                                    |   | City & State                                    |                                    | 6. Election Campaign Financing \$5.00 May Be  |   |  |            |
| 23  |   | 28  |                                    | Trust Fund Contribution   | Added to  | Fees                                       |            |
| Zip   | Country   | Zip   | Country                            | 8. This corporation owes the current y  |   | ¬  |            |
| 24  | 25  | 11  | 10                                 | Personal Property Tax.  |   | □No  |            |
|   | 9. Name and Address of Curre                      |   |                                    | 10. Name and Address of New Regis   | tered Agent                                     |  |            |
|   | in the second                                     | profest of the first                            | 81 Name                            |   |   |  |            |
| SPOTO, SHANNON G                                |   |   | 82 Street Add                      | ress (P.O. Box Number is Not Acceptable)  |   |  |            |
| 7401 VERNA-BETHANY ROAD                         |   |   |                                    | 7 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4   | 1. 45 2. 40 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | (49 x 20 x 2 |            |
| MYA   | KKA CITY FL 34251                                 |   | 83                                 |   |   | 日本   日本                                    |            |
| 4   |   |   | 84 City                            | 1   | 85 Zip C  | ode  |            |
|   |   |   |                                    | . <u> </u>  | <u> </u>  |  |            |
| agent. I a                                      | m familiar with, and accept the oblig             | ations of, Section 607.0505, Flori              | da Statutes.                       | poration submits this statement for the purp<br>ion's board of directors. I hereby accept the |   | istered                                    | l _        |
| SIGNATURE                                       | Signature, typed or printed name of registered ag |   | Registered Agent signature require | ADDITIONS/CHANGES TO OFFICE   | ATE   | 2S IN 12                                   | 80/        |
| 12.   | <del>-</del>                                      | ND DIRECTORS                                    | 13.                                | ADDITIONS/CHANGES TO OFFICE   | Change  | ☐ Addition                                 | 7          |
| TITLE   | P   | ☐ DELETE  | 1.1 TITLE                          |   | т. т. т.<br>Ст. т. т.                           |  | , <b>T</b> |
| NAME  | HUCKLEBERRY, MICHAEL A                            |   | 1.2 NAME                           | ······································  |   |  | Š          |
| STREET ADDRESS                                  | 7401 VERNA BETHANY RD.                            |   | 1.3 STREET ADDRESS                 |   |   |  | , C        |
| CITY-ST-ZIP                                     | MYAKKA CITY FL 34251                              | -   | 1.4 CITY-ST-ZIP                    |   | Change  | Addition                                   | , C        |
| TITLE   | VP  | ☐ DELETE  | 2.1 TITLE                          | 3   |   |  | i          |
| NAME  | SPOTO, JAMES C                                    |   | 2.2 NAME                           | ·   | 13  |  | i          |
| STREET ADDRESS                                  | 7401 VERNA BETHANY RD                             |   | 2.3 STREET ADDRESS                 |   |   |  | ĺ          |
| C/TY-ST-ZIP                                     | MYAKKA CITY FL 34251                              | Carlotte Commence                               | 2.4 CITY-ST-ZIP                    |   | [] Change                                       | Addition                                   | l          |
| TITLE STOCK                                     | , ST AND AND THE PARTY OF                         | DELETE □ DELETE                                 | 3.1 TITLE                          | 7.8 · · ·   | C) Outside                                      |  | ĺ          |
| NAME  | SPOTO, SHANNON G                                  |   | 3.2 NAME                           | er e  | 3   | -  | ĺ          |
| STREET ADDRESS                                  | 7401 VERNA BETHANY RD.                            |   | 3.3 STREET ADDRESS                 | र प्राप्त के क्षेत्र के किल्लाहरू हैं कि है।<br>इस स्टब्स के सम्बद्ध                          |   | <b>经过的报</b>                                | l          |
| CITY-ST-ZIP                                     | MYAKKA CITY FL 34251                              |   | 3.4. CITY-ST-ZIP                   |   | Change  | Addition                                   | ĺ          |
| TITLE   |   | ☐ DELETE  | 4.1 TITLE                          |   | · · · · · · · · · · · · · · · · · · ·           | [7] Addition                               | {          |
| NAME  | 60-XE - VO-1                                      | e e e e e e e e e e e e e e e e e e e           | 4. 2 NAME                          |   |   |  | 1          |
| STREET ADDRESS                                  |   | 45;   | 4.3 STREET ADDRESS                 |   |   |  | ĺ          |
| CITY-ST-ZIP                                     |   |   | 4.4 CITY-ST-ZIP                    |   |   | - Addition                                 |            |
| TITLE   | 1   | ☐ DELETE  | 5.1 TITLE                          |   | Change  | Addition                                   |            |
| NAME  |   |   | 5.2 NAME                           |   | •         |  | }          |
| STREET ADDRESS                                  | ;   |   | 5.3 STREET ADDRESS                 |   |   |  |            |
| CITY-ST-ZIP                                     | 1.0   |   | 5.4 CITY-ST-ZIP                    |   |   |  | Ι,         |
| TITLE   | 114. 11. 11. 11. 11. 11. 11. 11. 11. 11.          | ☐ DELETE  | 6.1 TITLE                          |   | ☐ Change  | ☐ Addition                                 |            |
| NAME  | 7401 ASIA ST 4 ST 2                               |   | 6.2 NAME                           |   |   |  |            |
| STREET ADDRESS                                  | BARLON STATE                                      |   | 6.3 STREET ADDRESS                 |   |   |  |            |
| SINCE I MUDINESS                                | 1 14  |   | 64 CITY-ST-ZIP                     |   |   |  | 1          |

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.