

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

FILED  
Jun 01, 1999 8:00 am  
Secretary of State

06-01-1999 90039 032 \*\*\*150.00

DOCUMENT # P98000028406

1. Corporation Name

RHUNTS ENGINEERING, INC.

Principal Place of Business

568 BAYWOOD DR. NORTH  
PINELLAS COUNTY  
DUNEDIN FL 34698

Mailing Address

568 BAYWOOD DR. NORTH  
PINELLAS COUNTY  
DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1998

4. FEI Number

59-3509551

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 501 S. Paula  
Suite, Apt. #, etc.

2a. Mailing Address

26 501 S. Paula  
Suite, Apt. #, etc.

City & State

23 Dunedin FL

Zip Country

24 34698 25 Pinellas

City & State

28 Dunedin FL

Zip Country

29 34698 30 Pinellas

9. Name and Address of Current Registered Agent

HUNT, TIMOTHY L  
568 BAYWOOD DR. NORTH  
PINELLAS COUNTY  
DUNEDIN FL 34698

10. Name and Address of New Registered Agent

81 Name

Hunt, Timothy L

82 Street Address (P.O. Box Number is Not Acceptable)

501 S. Paula

83

Pinellas County

84 City

Dunedin

FL

85 Zip Code

34698

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HUNT, TIMOTHY L  
STREET ADDRESS 568 BAYWOOD DR. NORTH  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☒ DELETE

NAME DAY, PHYLLIS M  
STREET ADDRESS 609 S. DELAWARE AVE.  
CITY-ST-ZIP TAMPA FL 33606-2610

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D, P, S, T. ☒ Change ☐ Addition

1.2 NAME Hunt, Timothy L

1.3 STREET ADDRESS 501 S. Paula

1.4 CITY-ST-ZIP Dunedin, FL 34698

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/30/99

Date

Daytime Phone #

0499908

CR2E034 (11/98)