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DIVISION OF CORPORATIONS

95 FEB 28 PM 3:44

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S19180 (6)

1. Corporation Name

HUNTER HOLDINGS OF PONCE INLET, INC.

Principal Place of Business

30 INLET HARBOR ROAD
PONCE INLET FL 32127

Mailing Address

30 INLET HARBOR ROAD
PONCE INLET FL 32127

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/14/1990

3a. Date of Last Report

02/07/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3046824

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PETERSON, SID C., JR
418 CANAL STREET
NEW SMYRNA BEACH FL 32168

81 Name

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

83

84 City

FL

85

Zip Code

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME WHYTE, ANN L.
STREET ADDRESS 92 DIFFIN DRIVE
CITY - ST - ZIP WELLAND ONTARIO CANA

TITLE VD
NAME WHYTE, WAYNE
STREET ADDRESS 92 DIFFIN DRIVE
CITY - ST - ZIP WELLAND ONTARIO CANA

TITLE TD
NAME WHYTE, STEVEN H.
STREET ADDRESS 92 DIFFIN DRIVE
CITY - ST - ZIP WELLAND ONTARIO CANA

TITLE SD
NAME MOORE, SHARON L.
STREET ADDRESS 92 DIFFIN DRIVE
CITY - ST - ZIP WELLAND ONTARIO CANA

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANN L. WHYTE

FEB 15/95 (905) 732-4424