**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **S45774**

1. Corporation Name

HOUDYSHELL, INC.

## FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90109 028 \*\*\*150.00



Principal Place	e of Business	Maili	ng Address					1.05.15.1		
P. O. BOX 4200 P. O. BOX 4200										
VERO BEACH FL 32964-1200 VERO BEACH FL 32964-1200								DO NOT WRITE IN TH	IS SPACE	
								3. Date Incorporated or Qualifed		
								04/15/1991		
2 Principal D	lace of Business		Mailing Address					4. FEI Number	Apr	olied For
2. Principal Pi	iaco di Buaineaa	26						59-3069387	<u> </u>	Applicable
Suite, Apt.	uite, Apt. #, etc.						\$8.75 A	dditional		
22 -	ing Otto.	27					-	5. Certificate of Status Desired	~~ - Fee Rec	quired: :
City & State	e	City & State						6. Election Campaign Financing	\$5.00	May Be
23		28						Trust Fund Contribution	Added to	Fees
Zip	Country	Z	ip	Cou	ntry			8. This corporation owes the current year	ntangible	
24	25	29		30				Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registe	red Agent		Ĺ.,			10. Name and Address of New Registere	d Agent	
	PANCE IN MANCE IN				81	Name	•			
HOUDYSHELL, VANCE W.					82	Stree	t Addre	dress (P.O. Box Number is Not Acceptable)		
22 STARFISH DRIVE				02 Subst						
VER	O BEACH, 32960				83					
					84	City			. 85 Zip C	ode
					1			F	L	
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 a	utnonzec	עמו	the cor	d corpo poration	ration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing its pointment as rec	registered gistered
_	minimal war, and docopy are doings	200.10 011 0	, , , , , , , , , , , , , , , , , , , ,							
SIGNATURE	Signature, typed or printed name of registered age	ent and title if a	pplicable. (NOTE	Registered	Agen	nt signatur	required	when reinstating) DATE		
12.	OFFICERS AI	ND DIREC		13.			<del></del>	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PTD		☐ DELETE	1.1 TI	ΠÆ				☐ Change	Addition Addition
NAME	HOUDSHELL, VANCE W			1.2 N	ME					
STREET ADDRESS	22 STARFISH DR			1.3 S1	REET	TADDRES	s			
CITY-ST-ZIP	VERO BEACH FL			1,4 CI	TY-S	T-ZIP				
TITLE	V		☐ DELETE	2.1 TI	TLE				Change	☐ Addition
NAME	HOUDYSHELL, JAMES E			2.2 N	ME					
STREET ADDRESS	22 STARFISH DRIVE			2.3 S	REET	TADDRES	s			
CITY-ST-ZIP	VERO BEACH FL	· -		∼ 2.4 C	ITY-S	ST-ZIP				
TITLE	SS		☐ DELETE	3.1 TI	TLE				☐ Change	Addition
NAME	HOUDYSHELL, VANCE W.			3.2 N	ME					
STREET ADDRESS	22 STARFIS DR			3.3 S	REE	T ADDRES	s	•		
CITY-ST-ZIP	VERO BEACH FL			3.4. C	ΠY-S	ST-ZIP				
TITLE			☐ DELETE	4.1 17	TLE				☐ Change	Addition
NAME				4. 2 N	AME					
STREET ADDRESS				4.3 S	TREE	TADDRES	s			
CITY-ST-ZIP_				4.4 C	TY-S	T-ZIP	ļ			[T] a saud
TITLE			☐ DELETE	5.1 TI			ļ		☐ Change	Addition
NAME				5.2 N	AME					
STREET ADDRESS	1			5.3 8	TREE	T ADDRES	s			
CITY-ST-ZIP						T-ZIP				
TITLE			☐ DELETE	6.1 Ti					Change	☐ Addition
NAME				6.2 N						
STREET ADDRESS				6.3 \$	TREE	T ADORES	s			
OTTY OT 710	· ·			6.4 C	TY-S	T-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 or an attachment with an address, with all other like empowered.

**SIGNATURE:**