SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S87705

(7)

HUTCHINSON DEVELOPMENT CORPORATION

5589	WHIRLAWAY ROAD		
PAI L	FREACH GARDENS FL	33418	

2. Principal Place of Business

Suite, Apt. #, etc.

Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

27

5589 WHIRLAWAY ROAD PALM BEACH GARDENS FL 33418

FILED Oct 01 1998 8:00am Secretary of State



Applied For Not Applicable

\$8.75 Additional

Fee Required

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5. Certificate of Status Desired

10/16/1991 4. FEI Number

65-0297787

City & State			City & State					6. Election Campaign Financing \$5.00 May Be	7		
		28					Trust Fund Contribution Added to Fees				
Zip		Count	ry	Zip		Coul	Country		8. This corporation owes or has paid the current year Intangible	7	
24 25			29	29 30			Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent											
HARRIS, G EORGE E. ESQ.						81	Name				
11380 PROSPERITY FARMS ROAD						ł	82	Street Addr	ess (P.O. Box Number is Not Acceptable)	+	
SUN	SUITE 201										
PALM BEACH GARDENS FL 33410							83			1	
							84	City	85 Zip Code	\dashv	
							"	Oity	FL BS Exp 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										ļ	
	Signature, lyped		e of registered agent a		<u>. </u>		ed Ag	gent algnature requ	olred when reinstating) DATE	4;	
12.			OFFICERS AND	DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-1	
TITLE	PD				L DELETE	1.1 111			Change Addition		
NAME	HUTCHIN					1.2 NA					
STREET ADDRESS	55 89 WH					1.3 STF	REET	ADDRESS			
CITY-ST-ZIP	PALM BE	<u>ach Gri</u>	DNS FL			1.4 CIT		ZIP		-	
TITLE					DELETE	2.1 T/T	LΕ		Change Addition		
NAME						2.2 NA	ME				
STREET ADDRESS						2.3 STF	REET	ADDRESS	:		
CITY-ST-ZIP	<u></u>					2.4 CH	Y-ST-	ZIP		╛	
TITLE					DELETE	3.1 TIT	LE		Change Addition		
NAME						3.2 NA	ME				
STREET ADDRESS						3.3 STF	REET	ADDRESS			
CITY-ST-ZIP				···	,	3.4 CIT	Y-ST-	ZIP		╛	
TITLE					DELETE	4.1 TIT	LE		Change Addition		
NAME						4.2 NA	ME				
STREET ADDRESS						4.3 STF	REETA	ADDRESS			
CITY-ST-ZIP						4.4 CIT	Y-ST-	ZIP			
TITLE					DELETE	5.1 TIT	LE		Change Addition		
NAME						5.2 NA	ME				
STREET ADDRESS						5.3 STR	REET	ADDRESS		1	
CITY-ST-ZIP						5.4 CIT	Y-5T-	ZIP			
TITLE					DELETE	6.1 T(T)	LE		Change Addition	1	
NAME						6.2 NA	ME		_ · _		
STREET ADDRESS						6.3 STR	REET!	ADDRESS			
CITY-ST-ZIP	<u>:</u>				/)	6.4 CIT	Y-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 to 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 of the 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 of the 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 of the corporation of the cor											