

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra H. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S99491

(0)

1. Corporation Name

HILL TRACTOR SERVICE, INC.



Principal Place of Business

P.O. BOX 9251
JACKSONVILLE FL 32208

Mailing Address

P.O. BOX 9251
JACKSONVILLE FL 32208

3. Date Incorporated or Qualified
12/10/1991

3a. Date of Last Report
04/27/1995

4. FID Number
59-3097640

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

10. Name and Address of New Registered Agent

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

HILL, WILLIE PAUL
5864 CARVER PINES CT
JACKSONVILLE FL 32219

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, under the 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 a registered agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Agent for Service of Process

Date

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME
HILL, WILLIE PAUL
STREET ADDRESS
5864 CARVER PINES COURT
CITY, ST, ZIP
JACKSONVILLE FL

2. TITLE ☐ DELETE

NAME
HILL, EVELYN C.
STREET ADDRESS
5864 CARVER PINES COURT
CITY, ST, ZIP
JACKSONVILLE FL

3. TITLE ☐ DELETE

NAME
HILL, JEFFREY R.
STREET ADDRESS
5864 CARVER PINES COURT
CITY, ST, ZIP
JACKSONVILLE FL

4. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

5. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

☐ Change ☐ Addition

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

☐ Change ☐ Addition

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

☐ Change ☐ Addition

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

☐ Change ☐ Addition

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this report is completely truthful and does not qualify for the exemption stated in Section 119.07(3)(g), 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 registered agent; and that I am authorized to file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with my address.

SIGNATURE:

Signature and Typed or Printed Name of Signing Officer or Director
Willie P. Hill, Dir.

3-29-96 904,622-9999

CR2E034 (12/95)