

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED

DOCUMENT # V11591

(7)

95 AUG 10 AM 11:46

1. Corporation Name

DOUG HILLMAN & CO., INC.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

5510 NORTH HARBOR VILLAGE DRIVE
VERO BEACH FL 32967

Mailing Address

5510 NORTH HARBOR VILLAGE DRIVE
VERO BEACH FL 32967

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/03/1992

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21 5015 TRADEWINDS

2a. Mailing Address

26 5015 TRADEWINDS

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 VERO BEACH, FLORIDA

27 City & State

28 VERO BEACH, FLORIDA

Zip

Country

24 32963

25 USA

Zip

Country

29 32963

30 USA

4. FEI Number

65-0316859

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

HILLMAN, R. DOUGLAS
5510 NORTH HARBOR VILLAGE DR.
VERO BEACH FL 32957

10. Name and Address of New Registered Agent

81 Name R. Douglas Hillman

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

5015 TRADEWINDS

83

84 City VERO BEACH

FL

85 Zip Code 32963

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

R. Douglas Hillman R. Douglas Hillman

8/1/95

DATE

Signature, typed or printed name of registered agent and the filer

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE D
NAME HILLMAN, R. DOUGLAS
STREET ADDRESS 5510 N HARBOR VILLAGE DR
CITY - ST - ZIP VERO BEACH FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 PTD
1.2 NAME HILLMAN, R. DOUGLAS
1.3 STREET ADDRESS 5015 TRADEWINDS
1.4 CITY - ST - ZIP VERO BEACH, FLORIDA 32963

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
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)(b), 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:

R. Douglas Hillman R. Douglas Hillman 4/26/95

407-231-2111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (3/95)