

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # V36326 1. Entity Name HUGHTONE INDUSTRIES, INC.	
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Principal Place of Business 6602 EXECUTIVE PARK COURT STE 205 JACKSONVILLE, FL 32216 US	Mailing Address 6602 EXECUTIVE PARK COURT STE 205 JACKSONVILLE, FL 32216 US
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01122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3153211	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUGHETT, PAUL
 344 S CHECKERBERRY WAY
 JACKSONVILLE, FL 32259

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

UN00000258081
 03/10/05-80024-016 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HUGHETT, PAUL 344 S CHECKER BERRY WAY JACKSONVILLE, FL 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST HUGHETT, LOUISE E 344 S CHECKERBERRY WAY JACKSONVILLE, FL 32299
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD WYLOGE, NEAL 2349 DSPREY LAKE DR. JACKSONVILLE, FL 32224
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: H. Neal Wyll **3/8/05** **904-332-7309**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #