

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V72201

1. Entity Name  
LONGHORN INSTALLATIONS, INC.



Principal Place of Business  
4212 N. DOWNING STREET  
TAMPA, FL 33603-4429

Mailing Address  
4212 N. DOWNING STREET  
TAMPA, FL 33603-4429

**FILED**  
**Jun 11, 2008 08:00 AM**  
**Secretary of State**



06022008 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3147086

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

HYDE, SHARON E  
4212 N. DOWNING STREET  
TAMPA, FL 33603-4429

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	HYDE, MARK S
STREET ADDRESS	4212 N DOWNING STREET
CITY-ST-ZIP	TAMPA, FL 33603
TITLE	V
NAME	HYDE, SHARON E
STREET ADDRESS	4212 N. DOWNING
CITY-ST-ZIP	TAMPA, FL 33603
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000952966  
06/11/08-80001-021 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.