

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

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**FILED**  
**Mar 29, 1996 08:00 AM**  
**Secretary of State**

**DOCUMENT # P95000075177 (2)**

1. Corporation Name

**A1A HURST BAIL BONDS, INC.**



Principal Place of Business

**914 ATLANTIC AVE.  
FERNANDINA BEACH FL 32034**

Mailing Address

**914 ATLANTIC AVE.  
FERNANDINA BEACH FL 32034**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

**HURST, RICHARD R  
914 ATLANTIC AVE.  
FERNANDINA BEACH FL 32034**

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 607.0507 and 607.1506, 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 set forth in, Section 607.0506, Florida Statutes.

SIGNATURE

*Richard R Hurst* President

3-21-96

DATE

12. OFFICERS AND DIRECTORS

TITLE  DELETE  
NAME **D HURST, RICHARD R**  
STREET ADDRESS **914 ATLANTIC AVE.**  
CITY-STATE-ZIP **FERNANDINA BEACH FL 32034**

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13.

1. TITLE  Change  Addition  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

5. TITLE  Change  Addition  
6. NAME  
7. STREET ADDRESS  
8. CITY-STATE-ZIP  Change  Addition

9. TITLE  Change  Addition  
10. NAME  
11. STREET ADDRESS  
12. CITY-STATE-ZIP  Change  Addition

13. TITLE  Change  Addition  
14. NAME  
15. STREET ADDRESS  
16. CITY-STATE-ZIP  Change  Addition

17. TITLE  Change  Addition  
18. NAME  
19. STREET ADDRESS  
20. CITY-STATE-ZIP  Change  Addition

21. TITLE  Change  Addition  
22. NAME  
23. STREET ADDRESS  
24. CITY-STATE-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 119.07(3)(k), 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 of this report as an officer or director with an address.

SIGNATURE: *Richard R Hurst*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-96

(904) 261-5719

CR2E034 (12/95)