

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 527996

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: HINES, HARTMAN & ASSOCIATES, INC.

**Current Principal Place of Business:**

114 E 5 AV  
TALLAHASSEE, FL 323033123

**New Principal Place of Business:**

**Current Mailing Address:**

114 E 5 AV  
TALLAHASSEE, FL 323033123

**New Mailing Address:**

FEI Number: 59-1723343      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HARTMAN, MICHAEL S  
114 E 5 AV  
TALLAHASSEE, FL 32303      US

**Name and Address of New Registered Agent:**

HARTMAN, MICHAEL S PRES.  
114 E 5 AV  
TALLAHASSEE, FL 32303      US

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.

SIGNATURE: MICHAEL S. HARTMAN

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: HARTMAN, MICHAEL S.,  
Address: 3916 WOODGREEN WAY  
City-St-Zip: TALLAHASSEE, FL

Title: ST      ( ) Delete  
Name: HARTMAN, SHARON D.  
Address: 3916 WOODGREEN WAY  
City-St-Zip: TALLAHASSEE, FL

Title: VP      ( ) Delete  
Name: SCARINGE, MATTHEW T  
Address: 114 E 5TH AVE  
City-St-Zip: TALLAHASSEE, FL 32303

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL S. HARTMAN

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

Date