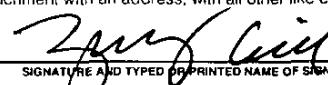


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90191 043 ***150.00

DOCUMENT # F02000002346 1. Entity Name HRA MANAGEMENT CORPORATION					
Principal Place of Business 1701 HWY A1A SUITE 304 VERO BEACH, FL 32963			Mailing Address 1701 HWY A1A SUITE 304 VERO BEACH, FL 32963		
2. Principal Place of Business 1440 Highway A1A Suite, Apt. #, etc.			3. Mailing Address 1440 Highway A1A Suite, Apt. #, etc.		
City & State Vero Beach, FL Zip 32963		City & State Vero Beach, FL Zip 32963		4. FEI Number 61-1408617	
Country USA		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent F & L CORP. ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, FL 32202				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
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		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP SMICK, TIMOTHY S 1701 HWY A1A, SUITE 304 VERO BEACH, FL 32963	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS SIMMONS, DANIEL 1701 HWY A1A, SUITE 304 VERO BEACH, FL 32963	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AILL, ZACHARY A 1701 HWY. A1A, STE. 304 VERO BEACH, FL 32963	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1440 Highway A1A Vero Beach, FL 32963	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1440 Highway A1A Vero Beach, FL 32963	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1440 Highway A1A Vero Beach, FL 32963	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify 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 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:  3/22/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

50036508



01112005 Chg-P CR2E034 (10/03)