

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 13, 2003 8:00 am**  
**Secretary of State**

01-13-2003 90455 008 \*\*\*\*61.25

**DOCUMENT # N42284**

1. Entity Name

**H.O.W., INC.**



Principal Place of Business

**1015 MANATEE AVE E  
BRADENTON FL 34208  
US**

Mailing Address

**PO BOX 1262  
BRADENTON FL 34206  
US**

**90001143**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0258159**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRYANT, BRENDA J  
643 11TH AVE. E.  
BRADENTON FL 34208**

Name **Brenda Bryant**  
Street Address (P.O. Box Number is Not Acceptable)

**643 11th Ave E.**

City **Bradenton**

FL

Zip Code

**34208**

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

**Brenda Bryant**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
NAME **BENTON, GERALD**  
STREET ADDRESS **917 WINTERGARDEN DRIVE**  
CITY-ST-ZIP **SARASOTA FL 34243**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **JACOBSON, HEATHER**  
STREET ADDRESS **244 14TH AVE W**  
CITY-ST-ZIP **BRADENTON FL 34205**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **JOHNSON, CHERRIE**  
STREET ADDRESS **906 28TH STREET EAST**  
CITY-ST-ZIP **BRADENTON FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **T** ☐ Delete  
NAME **ACKLES, JOYCE**  
STREET ADDRESS **3017 7TH AVE W**  
CITY-ST-ZIP **BRADENTON FL 34205**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 617, 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:

**Brenda Bryant**

**941-746-9097**

CR2E037 (10/02)