2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055524

Entity Name: HLC 3 CORP.

FILED Aug 20, 2005 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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800 OCALA RD 300-161 TALLAHASSEE, FL 32304

Current Mailing Address: New Mailing Address:

800 OCALA RD 300-161 TALLAHASSEE, FL 32304

FEI Number: 20-1039598 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LEWIS, MIKAL

1999 DARRYL DR APT C

TALLAHASSEE, FL 32301 US

LEWIS, MIKAL

3700 CAPITAL CIRCLE SE

204

TALLAHASSEE, FL 32301 US 204 TALLAHASSEE, FL 32311 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: 08/20/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 COLE, CORY
 Name:
 COLE, CORY

 Address:
 1999 DARRYL DR APT C
 Address:
 3700 CAPITAL CIRCLE SE APT 201

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32311

Title: CEO () Delete Title: CEO (X) Change () Addition Name: LEWIS. MIKAL Name: LEWIS. MIKAL

Address: 1999 DARRYL DR APT C Address: 3700 CAPITAL CIRCLE SE APT 201
City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32311

Title: CFOT () Delete Title: CFOT (X) Change () Addition

Name: HANDY, BRANDON Name: HANDY, BRANDON
Address: 1999 DARRYL DR APT C Address: 2387 TINA DR

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

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: MIKAL LEWIS CEO 08/20/2005