

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 09, 2004 8:00 am**  
**Secretary of State**

01-09-2004 90066 010 \*\*\*150.00

**DOCUMENT # 293533**

1. Entity Name  
**HILL FAMILY VENTURES, INC.**



Principal Place of Business  
**4607 RIDGECLIFF  
BRANDON, FL 33511**

Mailing Address  
**2602 S MACDILL AVE  
PO BOX 14417  
TAMPA, FL 33690**

**44000341**

2. Principal Place of Business

3. Mailing Address

**4607 Ridgecliff Dr**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
**Brandon**

Zip

Country

Zip  
**33511**

Country

01052004

Chg-P

CR2E034 (10/03)

4. FEI Number  
**59-1096868**

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**HILL, LEE H III  
4607 RIDGECLIFF DR  
BRANDON, FL 33511**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 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  
**SD  
HILL, PATRICIA S.  
4607 RIDGECLIFF DR  
BRANDON, FL 33511** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VDI  
HILL, DOROTHY S  
4607 RIDGECLIFF DR  
BRANDON, FL 33511** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
HILL, LEE H, III  
4607 RIDGECLIFF DR  
BRANDON, FL 33511** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CD  
HILL, LEE H, JR  
4607 RIDGECLIFF DR  
BRANDON, FL 33511** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/7/04**  
Date

**813-245-9330**  
Daytime Phone #