

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 15, 2005 8:00 am**  
**Secretary of State**

03-15-2005 90040 031 \*\*\*150.00

**DOCUMENT # 420352**

1. Entity Name  
**H. F. DEVELOPMENT CO.**



Principal Place of Business  
**100 S 2ND ST, ROOM 100  
P.O. BOX 249  
FT. PIERCE, FL 34954-7249 US**

Mailing Address  
**100 S 2ND ST, ROOM 100  
P.O. BOX 249 ATTN: SANTUUSTE  
FT. PIERCE, FL 34954-7249 US**

**50026820**



02102005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1512658**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

~~OVERTON, JERRY D~~ Kenneth Penny  
~~5080 SW 69TH STREET~~ 726 36th Avenue  
~~PALM CITY, FL 34990~~ Vero Beach, FL 32968

**DO NOT WRITE  
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HANKLE, DAVID C. 1075 31ST AVE VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SANTUUSTE, TONI 15342 WALDO PEPPER DR FT PIERCE, FL 34987
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <del>OVERTON, JERRY D</del> Kenneth Penny <del>5080 SW 69TH ST</del> 726 36th Avenue <del>PALM CITY, FL</del> Vero Beach, FL 32968
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD CALLAHAN, H. MICHAEL 306 14TH AVENUE VERO BEACH, FL 32962
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:**

*David C. Hankle*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**David C. Hankle**

**2/10/05**

Date

**772/460-7007**

Daytime Phone #