

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # 504504 1. Entity Name HEWITT PROPERTIES, INC.	
--	---

Principal Place of Business 1411 EDGEWATER DRIVE, STE. 101 ORLANDO, FL 32804	Mailing Address 1411 EDGEWATER DRIVE, STE. 101 ORLANDO, FL 32804
--	--



03072007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1678330	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HEWITT, ROBERT W.
1411 EDGEWATER DRIVE
SUITE 101
ORLANDO, FL 32804

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, 2007 Fee will be \$550.00

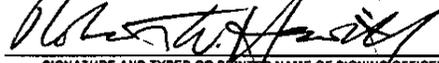
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HEWITT, ROBERT C. 1411 EDGEWATER DR ORLANDO FL,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HEWITT, ROBERT W. 1411 EDGEWATER DR. ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEWITT, THOMAS W 1411 EDGEWATER DR ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000719723
 05/01/07-80075-016 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Date: 3/8/07 Daytime Phone #: 407-318-7570