

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 A
Secretary of State

DOCUMENT # F03000003772

1. Entity Name
HCF REALTY OF SUNSHINE GARDENS, INC.



Principal Place of Business
12080 SW HWY 484
DUNNELLON, FL 34432-6408

Mailing Address
1100 SHAWNEE RD.
DUNNELLON, FL 34432-6408

DO NOT WRITE IN THIS SPACE



04142005 No Chg-P CR2E034 (10/03)

4. FEI Number
01-0750717

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RUGGLES, THOMAS W ESQ
603 INDIAN ROCKS ROAD
BELLEAIR, FL 33756

**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 P
NAME UNVERFERTH, JAMES W
STREET ADDRESS 1100 SHAWNEE ROAD
CITY - ST - ZIP LIMA, OH 45805

TITLE EXEV
NAME WILDER, ROBERT S
STREET ADDRESS 1100 SHAWNEE ROAD
CITY - ST - ZIP LIMA, OH 45805

TITLE VTS
NAME RINEHART, FRED J
STREET ADDRESS 1100 SHAWNEE ROAD
CITY - ST - ZIP LIMA, OH 45805

TITLE VDP
NAME SEITZ, DAVID A
STREET ADDRESS 1100 SHAWNEE ROAD
CITY - ST - ZIP LIMA, OH 45805

TITLE T
NAME DAVIS, ERNEST W
STREET ADDRESS 1100 SHAWNEE ROAD
CITY - ST - ZIP LIMA, OH 45805

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000330191
04/25/05-80145-011 300.00

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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: Fred J. Rinehart
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-05 419-999-2010
Date Daytime Phone #

FRED J. RINEHART
V.P. - TAXATION