

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90008 032 ***150.00

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1. Entity Name
HEI GROUP, INC. (DELAWARE)



Principal Place of Business

**5901 SUN BLVD.
STE. 107
ST. PETERSBURG, FL 33715-1161 US**

Mailing Address

**5901 SUN BLVD.
STE. 107
ST. PETE., FL 33715-1161 US**

2. Principal Place of Business

**101 E. KENNEDY
Suite, Apt. #, etc.
SUITE 2200**

3. Mailing Address

**101 E. KENNEDY
Suite, Apt. #, etc.
SUITE 2200**

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33602

Country

USA

Zip

33602

Country

USA

6. Name and Address of Current Registered Agent

**WEINBREN, DON B
101 E KENNEDY BLVD
STE 2700
TAMPA, FL 33602**

01072004 Chg-P CR2E034 (10/03)

4. FEI Number
22-2923317

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
HUNTER, DAVID P
2505 PASS-A-GRILLE WAY
SAINT PETERSBURG BEACH, FL 33706** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BROCK, GEORGANNE
1648 BRIGHT WATERO BLVD
ST PETE, FL 33704** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCANLAN, LAWRENCE
129 LINSAY LANE
OLDSMAR, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
COATS, DAVID
PO BOX 430
PALMETTO, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HONAN, THOMAS
5279 ISLAKEY
ST PETERSBURG, FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank] ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
JOHN STONE
8300 HILTON DR
POLAND Ohio 44514** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank] ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank] ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank] ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
DEWBY HICKMAN
205 LAVENDER OASIS
PEACHTREE CITY GA 30269** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
RICHARD VERNICK
1000 US1 UNIT 752
JUPITER FL 33477** ☐ 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:

Georganne Brock
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-04

Date

707-896-5066

Daytime Phone #