2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000005506

Entity Name: H. F. I. CORPORATION

22130 CANDLE CT

BOCA RATON, FL 33428

Address: City-St-Zip: FILED Apr 16, 2003 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
190 W. GLADES RD STE C BOCA RATON, FL 33432				2295 NW CORPORATE BLVD #240 BOCA RATON, FL 33431	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
190 W. GLADES RD STE C BOCA RATON, FL 33432			2295 NW CORPORATE BLVD #240 BOCA RATON, FL 33431		
FEI Number	: 38-0496840	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
3746 OLD	ACQUELINE K LIGHTHOUSE TON, FL 3341	E CIRCLE			
	named entity e of Florida.	submits this statement for the p	purpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
	mpaign Financin S AND DIREC	g Trust Fund Contribution(). CTORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	LUCAS, JACQI	HTHOUSE CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT (KARL, JULIE A 1400 63RD ST DES MOINES,	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V (KENT, RONAL) Delete D	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JACQUELINE K. LUCAS CPSD 04/16/2003