

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000002463 1. Entity Name HODGES DEVELOPMENT CORPORATION	
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Principal Place of Business
201 LOUDON ROAD
CONCORD, NH 03301-6000

Mailing Address
201 LOUDON ROAD
CONCORD, NH 03301-6000



01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0279951	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBBINS JR, R. JAMES
101 EAST KENNEDY BLVD., STE 3700
TAMPA, FL 33602

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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	PCD
NAME	HODGES SR, DAVID A
STREET ADDRESS	201 LOUDON ROAD
CITY-ST-ZIP	CONCORD, NH

TITLE	VD
NAME	SANBORN, BARRY R
STREET ADDRESS	201 LOUDON ROAD
CITY-ST-ZIP	CONCORD, NH

TITLE	TD
NAME	JOHNSON, ALAN W
STREET ADDRESS	201 LOUDON ROAD
CITY-ST-ZIP	CONCORD, NH

TITLE	S
NAME	SOKUL JR, JOHN H
STREET ADDRESS	201 LOUDON ROAD
CITY-ST-ZIP	CONCORD, NH

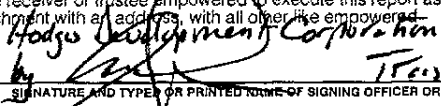
TITLE	VD
NAME	HODGES, DAVID JR
STREET ADDRESS	201 LOUDON ROAD
CITY-ST-ZIP	CONCORD, NH

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UD0000003789
01/13/04-80071-007 150.00

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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)(f), 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

1/6/04 (603) 224-9221
Date Daytime Phone #