

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # F99000004181

1. Entity Name

HQM AT LAKE WORTH, INC.



FILED

04 OCT -5 AM 10:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
2401 PGA BOULEVARD, SUITE 155  
PALM BEACH GARDENS FL 33410

Mailing Address  
2401 PGA BOULEVARD, SUITE 155  
PALM BEACH GARDENS FL 33410

2. Principal Place of Business

3. Mailing Address

2979 PGA Blvd.  
Palm Beach Gardens, FL 33410

2979 PGA Blvd.  
Palm Beach Gardens, FL 33410

MOORE

CR2E034 (4/04)

4. FEI Number  
65-0938438

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

ADAMS, SANDRA L  
2401 PGA BOULEVARD  
SUITE #155  
PALM BEACH GARDENS FL 33410

Name

Street Address

City

7. Name and Address of New Registered Agent

Sandra Adams  
2979 PGA Blvd.  
Palm Beach Gardens, FL 33410

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 \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME FAGO, ELIZABETH  
STREET ADDRESS 2401 PGA BOULEVARD, SUITE 155  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE CEOS ☐ Delete  
NAME WALCZAK, PAUL  
STREET ADDRESS 2401 PGA BOULEVARD, SUITE 155  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE VP ☐ Delete  
NAME STEIER, JOSEPH  
STREET ADDRESS 2401 PGA BLVD., S-155  
CITY-ST-ZIP WEST PALM BEACH FL 33410

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 2979 PGA BLVD.  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 2979 PGA BLVD.  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE ☒ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAUL WALCZAK 8/31/04

Date

Daytime Phone #