

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 03, 2003 8:00 am**  
**Secretary of State**

04-03-2003 90167 018 \*\*\*150.00

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**DOCUMENT # G53855**

1. Entity Name

MARHARR FIRST INVESTMENT, INC.



Principal Place of Business

C/O DONALD E. HAWKINS  
2526 S PENINSULA DR  
DAYTONA BEACH FL 32118

Mailing Address

C/O DONALD E. HAWKINS  
2526 S PENINSULA DR  
DAYTONA BEACH FL 32118

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ CHECK HERE IF MAKING CHANGES

59-2380979  
NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HURST, MARJORIE W  
2526 S PENINSULA DR  
DAYTONA BEACH FL 32118

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, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME HURST, MARJORIE W.  
STREET ADDRESS 2526 SOUTH PENINSULA DR.  
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE STD  
NAME CARVER, HARRIETTE J.  
STREET ADDRESS 104 ROBERTS LANE, #400  
CITY-ST-ZIP ALEXANDRIA VA 22314

TITLE  
NAME  
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CITY-ST-ZIP

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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:

*Marjorie W. Hurst*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 12, 2003

Date

386-761-2585

Daytime Phone #

CR2E034 (10/02)