

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90044 016 \*\*\*150.00

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DOCUMENT # H34197

1. Corporation Name

H & R PROPERTY MANAGEMENT, INC.

Principal Place of Business

195 WOODETTE DR.  
DUNEDIN FL 34698

Mailing Address

195 WOODETTE DR.  
DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1984

4. FEI Number

59-2478896

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax. ☒ Yes ☒ No

2. Principal Place of Business

21 433 S. Paula Dr. #28

Suite, Apt. #, etc.

22 Dunedin, Fl. 34698

City & State

23 34698

USA

Zip

Country

2a. Mailing Address

26 433 S. Paula Dr. #28

Suite, Apt. #, etc.

27 Dunedin, Fl.

City & State

28 34698

USA

Zip

Country

24

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9. Name and Address of Current Registered Agent

SOWDER, HELEN L.  
195 WOODETTE DR.  
DUNEDIN FL 33528

10. Name and Address of New Registered Agent

81 Name

Sowder, Helen L.

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

433 S. Paula Drive, Apt. 28

83

Dunedin, Fl. 34698

84 City

FL

85 Zip Code  
34698

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Helen L. Sowder*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-17-99

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE  
NAME SOWDER, HELEN L.  
STREET ADDRESS 195 WOODETTE DRIVE  
CITY-ST-ZIP DUNEDIN FL

TITLE D ☐ DELETE  
NAME RIKANSRUD, ERLING N.  
STREET ADDRESS 195 WOODETTE DRIVE  
CITY-ST-ZIP DUNEDIN FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 433 S. Paula Drive #28  
1.4 CITY-ST-ZIP Dunedin, Fl. 34698

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 433 S. Paula Drive, #28  
2.4 CITY-ST-ZIP Dunedin, Fl. 34698

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Helen L. Sowder*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-99 727-736-5432

Date

Daytime Phone #

CR2E034 (11/98)