

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90020 029 ***150.00

DOCUMENT # H48940

1. Entity Name
HALLMARK QUALITY HOMES, INC.

Principal Place of Business

**10210 N PALAFOX
 PENSACOLA FL 32534**

Mailing Address

**10210 N PALAFOX
 PENSACOLA FL 32534**

2. Principal Place of Business

10210 N. Palafox St
 Suite, Apt. #, etc.

3. Mailing Address

10210 N. Palafox St
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Pensacola, FL
 Zip: **32534** Country: **Escambia**

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Pensacola, FL
 Zip: **32534** Country: **Escambia**

4. FEI Number

59-2488716

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KNODEL, L. FRED SR.
 10210 N PALAFOX STREET
 PENSACOLA FL 32534**

7. Name and Address of New Registered Agent

Name **Stephen R. Moorhead, P.A.**
 Street Address (P.O. Box Number is Not Acceptable) **4300 Bayou Blvd, Ste. 13**
 City **Pensacola** FL Zip Code **32503-2688**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-11-02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PT** ☐ Delete
 NAME **KNODEL, L. FRED SR.**
 STREET ADDRESS **10407 RAWLINGS DRIVE**
 CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE **VS** ☐ Delete
 NAME **KNODEL, FREDDY, JR.**
 STREET ADDRESS **10419 RAWLINGSS DR**
 CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

L. Fred Knodel, Jr
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-2002
 Date

850 479 2444
 Daytime Phone #

CR2E034 (9/01)