

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 90475 010 \*\*\*150.00

**DOCUMENT # H54839**

1. Entity Name  
**H & A PLASTERING, INC.**



Principal Place of Business  
**16626 RICHLOAM LANE  
SPRING HILL FL 34610**

Mailing Address  
**16626 RICHLOAM LANE  
SPRING HILL FL 34610**



2. Principal Place of Business

**4260 Riviera Court  
Suite, Apt. #, etc.  
Spring Hill, FL  
City & State**

3. Mailing Address

**4260 Riviera Court  
Suite, Apt. #, etc.  
Spring Hill, FL  
City & State**

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2538907**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**HACKETT, DONALD  
16626 RICHLOAM LANE  
SPRING HILL FL 34610**

7. Name and Address of New Registered Agent

Name **Donald Hackett**  
Street Address (P.O. Box Number is Not Acceptable)  
**4260 Riviera Court  
City Spring Hill FL 34608**

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

TITLE **PD** ☐ Delete  
NAME **HACKETT, DONALD**  
STREET ADDRESS **16626 RICHLOAM LANE**  
CITY-ST-ZIP **SPRING HILL FL**

TITLE **S** ☐ Delete  
NAME **HACKETT, KATHRYN M**  
STREET ADDRESS **16626 RICHLOAM LANE**  
CITY-ST-ZIP **SPRING HILL 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **4260 Riviera Court**  
CITY-ST-ZIP **Spring Hill, FL 34608**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **4260 Riviera Court**  
CITY-ST-ZIP **Spring Hill, FL 34608**

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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: **Donald Hackett**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4/17/03** Daytime Phone # **727-992-4851**

CR2E034 (10/02)