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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # J11566

HDW DEVELOPMENT, INC.

Principal Plac	e of Business	Mailing Address							5.5 5.2
142 GOLD FLU	IME WAY	29605 US HWY 19 N							
CLEVELAND GA 30528 STE 250						DO NOT WO	TE IN TUIC	CDACE	
US CLEARWATER FL 34621 US						DO NOT WRI	IE IN THIS	SPACE	
_		03				3. Date Incorporated or Qualifed 05/01/1986			
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number		-	Applied For
21		26				59-2663447			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		•	Additional Required
City & Stat	te	City & State				6. Election Campaign Financing		\$5.0	0 May Be
23	ے محمد ہے کے محمد کے ا	28	2. •		-	Trust Fund Contribution	U ∻		d to Fees
Zip	Country	Zip	Count	try		8. This corporation owes the curr	ent year Inta	engible	
24	25	29 33761	30			Personal Property Tax.	,	Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New I	Registered	Agent	
			8	81 N	Vame				
	LACE, WILLIAM R			82 5	Etroot Addro	ess (P.O. Box Number is Not Accepta	ahla)		
	05, US HWY 19 N		"	62 S	Street Addre	ess (F.O. Box Number is Not Accept	abioj		
STE	250		8	83		,			
CLE	ARWATER FL 34621							1 .	
			8	84 (City		FL	85 Z	ip Code 33761
11. Pursuant	registered agent, or both, in the State of	t and 607.1506, Florida Statut If Florida, Such change was a	es, the abo uthorized b	ove-n hv the	amed corpo	pration submits this statement for the	ot the appoir	ntment as	registered
office or a	registered agent, or both, in the State o am familiar with, and accept the obligati	of Florida. Such change was a cons of, Section 607.0505, Flo	uthorized b rida Statute	by the tes.	e corporation	in's board of directors. I hereby acce	pt the appoir	ntment as	registered
office or a agent. I a SIGNATURE	registered agent, or both, in the State o am familiar with, and accept the obligati Signature, typed or printed name of registered agent	ons of, Section 607.0505, Flo and title if applicable. (NOTE	uthorized brida Statute	by the tes.	e corporation	in's board of directors. I hereby acce	pt the appoir	ntment as	registered
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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 chapter 607, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE 4

CITY-ST-ZIP

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90155 049 ***150.00