

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J47337

1. Entity Name

HARDY & CALLAWAY DEVELOPMENT GROUP, INC.

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90078 042 \*\*\*150.00

Principal Place of Business	Mailing Address
585 TECHNOLOGY PARK DRIVE SUITE 105 LAKE MARY FL 32746 US	585 TECHNOLOGY PARK DRIVE 105 LAKE MARY FL 32746-6239 US

2. Principal Place of Business 22902 LAKE SENECA RD Suite, Apt. #, etc.	3. Mailing Address 22902 LAKE SENECA RD Suite, Apt. #, etc.
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City & State EUSTIS FL	City & State EUSTIS FL
Zip 32736	Zip 32736
Country USA	Country USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2773648	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

HARDY, TOBY R  
585 TECHNOLOGY PARK DRIVE  
SUITE 105  
LAKE MARY FL 32746

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
22902 LAKE SENECA RD

City EUSTIS FL Zip Code 32736

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 *Toby R. Hardy* DATE 4-7-00

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2000 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CTD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARDY, TOBY R.		NAME		
STREET ADDRESS	585 TECHNOLOGY PARK DRIVE, SUITE 105		STREET ADDRESS	22902 LAKE SENECA RD	
CITY-ST-ZIP	LAKE MARY FL		CITY-ST-ZIP	EUSTIS FL 32736	
TITLE	DVS	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARDY, SUSAN T		NAME		
STREET ADDRESS	585 TECHNOLOGY PARK DRIVE, SUITE 105		STREET ADDRESS	22902 LAKE SENECA RD	
CITY-ST-ZIP	LAKE MARY FL		CITY-ST-ZIP	EUSTIS FL 32736	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: *Toby R. Hardy* DATE: 4-7-00 DAYTIME PHONE #: 352-351-2700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)