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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham'

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L56948

(7)

**HPD CORPORATION** 

CITY - ST - ZIP

FILED
Jun 02 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address Sume LS .						ALABA TANK ASSULTED	jai <b>bib</b> ia <b>bib</b> ik bib	
C/O NORTHERN TRUST BANK OF FL FHE CORPORATE SERVICE			CO-ING. ACLAS	أمددي	V .			
301 YAMATO ROAD		44700-U8-HICHWAY-ONE	- OTE-980 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	·pa	DO NOT WRITE IN THIS SPACE			
BOCA RATON FL 33431		WS	place	of	3. Date Incorporated or Qua		DI ACC	
}		••	husing		03/05/1990			
2. Principal P	Place of Business	2a. Mailing Address	A	_ د	4. FEI Number		A	pplied For
21		26 90 Northern T	PUST BANK	of 1	<u>65-0185868</u>			ot Applicable
Suite, Ap	#, etc.	Suite, Apt. #, etc.	٠ ١		5. Certificate of Status Desir	ed 🗆		Additional
City & Stat		27 3 0 1 4 2 m	ato Koa	G.				equired
23	ic.		ton. FL	_	<ol> <li>Election Campaign Finan- Trust Fund Contribution</li> </ol>	oing 🗍		May Be
Zip	Country	Zio	Country	·	8. This corporation owes or	has paid the cu		
24	25	29 33431	30 US		Personal Property 1ax du	e June 30.	☐ Yes [	_] No
	9. Name and Address of Currer	10. Name and Address of New Registered Agent						
1	IS CORPORATE SERVICES		81 Name		North	ern Tr	TUST A	BANK
11780 US HIGHWAY ONE STE 300			82 Street	Aderes	ss (P.O. Box Number is Not Ac	ceptable)		) MIX
	83 3	DI	Jamesa Ko	ad-Su	AC 11	11		
ואי	DRTH PALM BEACH FL 33408							
1			84 City 1	300	a Raton	FI	85 Zig	Code /
11. Pursuant	to the provisions of Sections 607 050	02 and 607.1508, Florida Statute	s the above-named	corpor	ration submits this statement for	or the purpose (	of changing i	its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Fam fimiliar with, and accept the obligations of Section 607.0505, Florida Statutes.								
SIGNATURE	lutto Weeren	)				5//8	7/98	
		·	Registered Agent signature	e required		DATE		
12. 107LE	OFFICERS AN	DELETE	13.	1	ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTOR  Change	RS IN 12  R Addition
NAME	DAVIS, RICHARD P		1.2 NAME			,	, Dimingo	1-1 radiion
STREET ADDRESS	4600 MIDDLETON PARK, CIR	ICLE E. APT. 4020 C. 641		Cyl	press Village	- (	4 Lin	14
CITY-ST-ZIP	OYPRESS VILLAGE FL 32204		1.4 CITY-S1-ZIP	Jac	cksonville, FL	32204	ad	ldress
TITLE	PTD	DELFTE	2.1 TITLE	1			Change	K Addition
NAME	DAVIS, HARRIET P		2.2 NAME			(1	4 lins	,
STREET ADDRESS	4600 MIDDLETON PARK, CIR		2 3 STREET ADDRESS		press Village	\	,	
CITY-ST-ZIP	CYPRESS VILLAGE FL-82204		2. 4 CiTY - S1 - ZiP	Jac	cksonville, FL	32204	ass	ress)
TITLE		☐ DETEIE	3.1 TITLE				Change	Addition
NAME OVEREZ ADORGON			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 THEF	<del> </del>			Change	Addition
NAME			4. 2 NAME	ĺ				
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 City - ST- ZIP					
TITLE		DELETE	5.1 TITLE	1			Change	Addition
NAME			5.2 NAME	İ				
STREET ADDRESS			53 STREET ADDRESS					
CITY-ST-ZiP			54 CITY-ST-ZIP					<u>.</u>
TITLE		₩ DELETE	61 TALE				☐ Change	☐ Addition
NAME			6.2 NAME	١.				WAL
STREET ADDRESS			6.3 STREET ADDRESS	18	BALIV			Y Jy (

14. Thereby 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 13 if changed, or on an attachment with an address

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