

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **L58819**

1. Entity Name
HARDEE POWER I, INC.



FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90222 034 ***150.00

0450259
AV

Principal Place of Business
C/O D. E. SCHWARTZ
702 N. FRANKLIN ST.
TAMPA FL 33602-4418
US

Mailing Address
C/O D. E. SCHWARTZ
P.O. BOX 111
TAMPA FL 33601-0111
US



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Zip Country

City & State
Zip Country

4. FEI Number **59-3003578**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
MCDEVITT, S M
702 N FRANKLIN ST
TAMPA FL 33602

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 NAME STREET ADDRESS CITY-ST-ZIP	PD LUDWIG, R. E 702 N FRANKLIN ST TAMPA FL 33602-4418	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GILLETTE, G. L. 702 N. FRANKLIN ST. TAMPA FL 33602-4418	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCHWARTZ, D. E. 702 N FRANKLIN ST TAMPA FL 33602	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EUSTACE, R. K 702 N FRANKLIN ST TAMPA FL 33602-4418	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MILLER, L A 702 N FRANKLIN ST TAMPA FL 33602-4418	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JENNINGS, G. D (JR) 702 N FRANKLIN ST TAMPA FL 33602-4418	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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: *[Signature]* **Schwartz** 4/28/03 813/228-4111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)