

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M87984

1. Entity Name

H & D HARDWOODS, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90073 009 ***150.00

Principal Place of Business

Mailing Address

PO BOX 49058
ST. PETERSBURG FL 33743
US

PO BOX 49058
ST. PETERSBURG FL 33743-9058
US

948442



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1620 51ST ST SO

3. Mailing Address

P.O. Box 49058

Suite, Apt. #, etc.

Suite, Apt. #, etc.

UNIT 10

City & State

GULFPORT, FL

City & State

ST PETERSBURG, FL

Zip

Country

33707

U.S.A

Zip

Country

33743

U.S.A

4. FEI Number

59-2901536

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEFF, DALE G.
3284 MORRIS STREET, NORTH
ST. PETERSBURG FL 33713

7. Name and Address of New Registered Agent

Name NEFF, DALE G.
Street Address (P.O. Box Number is Not Acceptable)
1620 51ST ST SO
GULFPORT
City GULFPORT FL Zip Code 33707

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 DALE G NEFF - PRES. DATE 4-19-00

Signature, typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE ☐ Delete
NAME D
STREET ADDRESS NEFF, DALE G.
CITY-ST-ZIP 3284 MORRIS ST., NORTH
ST. PETERSBURG FL

TITLE ☐ Delete
NAME D
STREET ADDRESS NEFF, DIANA LEE
CITY-ST-ZIP 3284 MORRIS ST., NORTH
ST. PETERSBURG 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME NEFF, DALE G
STREET ADDRESS 1620 51ST ST SO
CITY-ST-ZIP GULFPORT, FL 33707

TITLE ☒ Change ☐ Addition
NAME NEFF, DIANA LEE
STREET ADDRESS 1620 51ST ST SO
CITY-ST-ZIP GULFPORT, FL 33707

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

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: DALE G NEFF DATE 4-19-00 DAYTIME PHONE # 727-423-3895

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)