

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90732 015 ****61.25

DOCUMENT # N000000002413.1
1. Entity Name HONEYVINE RESIDENTS, INC.

DO NOT WRITE IN THIS SPACE

B0061529

2. Principal Place of Business <u>10365 ULMERTON RD</u> Suite, Apt. #, etc. <u>82</u> City & State <u>LARGO, FL</u> Zip <u>33771</u> Country <u>PINELLAS</u>		3. Mailing Address <u>10365 ULMERTON RD</u> Suite, Apt. #, etc. <u>82</u> City & State <u>LARGO, FL</u> Zip <u>33771</u> Country <u>PINELLAS</u>	
--	--	--	--

DO NOT WRITE IN THIS SPACE

4. FEI Number <u>59-2948035</u>	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name DON HAZELTON
Street Address (P.O. Box Number is Not Acceptable)
7501 142ND AVE N #357
City LARGO FL Zip Code 33771

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

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PD</u> <u>HEITHOFF, WAYNE</u> <u>10365 ULMERTON RD #79</u> <u>LARGO, FL 33771</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>VPD</u> <u>SLACK EDWARD</u> <u>10365 ULMERTON RD #2</u> <u>LARGO, FL 33771</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>SD</u> <u>MCALLISTER</u> <u>10365 ULMERTON RD #92</u> <u>LARGO, FL 33771</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>TD</u> <u>HAMM, C. WILLIAM</u> <u>10365 ULMERTON RD #82</u> <u>LARGO, FL 33771</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D</u> <u>KELLY, LAWRENCE</u> <u>10365 ULMERTON RD #4</u> <u>LARGO, FL 33771</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D</u> <u>NIELD, VALERIE</u> <u>10365 ULMERTON RD #42</u> <u>LARGO, FL 33771</u>

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: William Hamm - Treasurer 3/26/02 727-588-0177

CR2E037B (12/01)