

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 01, 2001 08:00 AM****Secretary of State****DOCUMENT # N03868**1. Entity Name
HFTP - MID-FLORIDA CHAPTER, INC.

Principal Place of Business P.O. BOX 1430 ORLANDO FL 328021430	Mailing Address P.O. BOX 1430 ORLANDO FL 328021430
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2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number
65-0038596

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

ROMANO JOE
9300 AIRPORT BLVDORLANDO FL
32801

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.

SIGNATURE _____ 05/01/2001

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW:
FEE IS \$61.25**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	SD RICKMANN RANDALL 9840 INTERNATIONAL DR. ORLANDO FL 32819 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROMANO JOE 9300 AIRPORT BLVD ORLANDO FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PARRISH BILL 9000 BAY HILL BLVD ORLANDO FL 32817 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MCCLOSKEY LARRY 1 GRAND CYPRESS BLVD ORLANDO FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILL DIANA J 1280 SCANDIA TERRACE OVIEDO FL 32765 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PENROD BRENDA 60 IVANHOE BLVD ORLANDO FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RICKMANN RANDALL 9840 INTERNATIONAL DR. ORLANDO FL 32819 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKIM DAVID 1742 COVEY CT KISSIMMEE FL 34744 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PARRISH BILL 9000 BAY HILL BLVD ORLANDO FL 32817 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCCLOSKEY LARRY 1 GRAND CYPRESS BLVD ORLANDO FL ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HILL DIANA J 1280 SCANDIA TERRACE OVIEDO FL 32765 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ROMANO JOE 9300 AIRPORT DRIVE ORLANDO FL ☒ 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)(f), 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDALL RICKMANN

TD

05/01/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)