

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90015 030 ****61.25

DOCUMENT # N42284

1. Entity Name

H.O.W., INC.



Principal Place of Business

1015 MANATEE AVE E
BRADENTON FL 34208
US

Mailing Address

PO BOX 1262
BRADENTON FL 34206
US

2. Principal Place of Business

1103 29th Ave West

3. Mailing Address

Suite, Apt. #, etc.

Bradenton

City & State

Manatee County Florida

Zip

Country

34205

Country

Zip

Country

4. FEI Number

65-0258159

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRYANT, BRENDA J
643 11TH AVE. E.
BRADENTON FL 34208

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

Brenda Bryant

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BENTON, GERALD	
STREET ADDRESS	917 WINTERGARDEN DRIVE	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, CHERRIE	
STREET ADDRESS	906 28TH STREET EAST	
CITY-ST-ZIP	BRADENTON FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	ACKLES, JOYCE	
STREET ADDRESS	3017 7TH AVE W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	D	<input type="checkbox"/> Delete
NAME	Byrd, Ruby	
STREET ADDRESS	1309 14th Ave E	
CITY-ST-ZIP	Bradenton, FL 34208	
TITLE	Vice President	<input type="checkbox"/> Delete
NAME	Huffman, Corey	
STREET ADDRESS	4813 N Rye Rd	
CITY-ST-ZIP	Parrish, FL 34219	
TITLE	D	<input type="checkbox"/> Delete
NAME	Baker Amanda	
STREET ADDRESS	2802 4th Ave W	
CITY-ST-ZIP	Bradenton, FL 34205	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brenda Bryant

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-04

Date

941-746-9099

Daytime Phone #