

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000002687

1. Entity Name

HMGS SOUTH, INC.

Principal Place of Business

1416 FORSYTH WAY
BRADON FL 33511
US

Mailing Address

1416 FORSYTH WAY
BRADON FL 33511
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

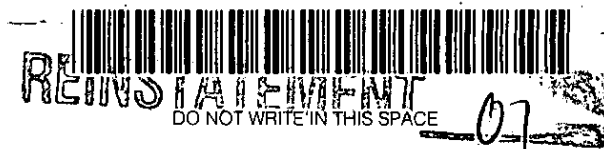
City & State

Zip

Country

Zip

Country



4. FEI Number NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEES, CURTIS L
130 RUBY LAKE DR SE
WINTER HAVEN FL 33884

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9/29/01

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
NAME KENNEDY, CHUCK
STREET ADDRESS P.O. BOX 1177
CITY-ST-ZIP BOWLING GREEN FL 33834

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS 600004638996--5
CITY-ST-ZIP -10/17/01--01010--018
****236.25 ****236.25
☐ Change ☐ Addition

TITLE ☐ Delete
NAME GRICE, RICKEY
STREET ADDRESS 3426 LORI LANE S
CITY-ST-ZIP LAKELAND FL 33801

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

TITLE ☐ Delete
NAME MASON, LEON
STREET ADDRESS 3425 SPINEY RD
CITY-ST-ZIP LAKELAND FL 33810

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

TITLE ☐ Delete
NAME SCOTT, RHETT
STREET ADDRESS 1416 FORSYTH WAY
CITY-ST-ZIP BRANDON FL 33511

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

TITLE ☐ Delete
NAME PHILLIPS, RAYMOND F
STREET ADDRESS 12108 LONGSTRAP LANE
CITY-ST-ZIP BAYONET POINT FL 34667

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

TITLE ☐ Delete
NAME STROUP, BRYAN
STREET ADDRESS 681 NE 35TH LOOP
CITY-ST-ZIP Ocala FL 34479

TITLE ☒ Change ☐ Addition
NAME VD
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 another like empowered.

SIGNATURE:

REQUIRED

29 SEP 01 813 828 1391

CR2E037 (5/01)