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

changed, or on an attachment with an address, with all other like empowered

## Apr 22, 2004 8:00 am Secretary of State DOCUMENT # N97000004140 1. Entity Name 04-22-2004 90019 010 \*\*\*\*61.25 HKPC, INC. Principal Place of Business Mailing Address 9800 4TH STREET NORTH 9800 4TH STREET NORTH 04038941 SUITE 206 ST. PETERSBURG FL 33702 SUITE 206 ST. PETERSBURG FL 33702 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) 4. FEI Number Applied For City & State City & State 31-1573543 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RUGG, ELIZABETH Street Address (P.O. Box Number is Not Acceptable) 9800 4TH STREET NORTH SUITE 206 ST. PETERSBURG FL 33702 Zip Code City 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be П Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. DC X Addition Change TITLE X Delete TITLE HALL, CHARLES A John Hamerlinck NAME NAME 9800 4TH ST N STE 206 STREET ADDRESS 9800 4th St. N Suite 206 St. Petersburg, FL 33702 STREET ADDRESS SAINT PETERSBURG FL 33702 CITY-ST-ZIP CITY-ST-ZIP X Addition ☐ Delete ☐ Change TITLE TITLE Steve Lesky HEILMAN, JOHN NAME NAME 9800 4th St. N Suite 206 500 7TH AVENUE SOUTH STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33701 St. Petersburg, FL 33702 CITY-ST-ZIP CITY-ST-ZIP X Addition ☐ Delete TITLE Change TITLE Kenneth L. Rigsby SIVER, ROBERT I NAME NAME 9800 4th St. N Suite 206 801 6TH STREET SOUTH STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33701 St. Petersburg, FL 33702 CITY-ST-ZIP CITY-ST-ZIF Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 eath; 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

Brabah m. RWar

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