

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N97000005301**

1. Entity Name

HTR FOUNDATION, INC.**FILED****Mar 06, 2002 8:00 am**
Secretary of State

03-06-2002 90069 035 ****61.25

Principal Place of Business

Mailing Address

100 SECOND AVE S.
STE 600
ST. PETERSBURG FL 33701
US100 SECOND AVE S
STE 600
ST. PETERSBURG FL 33701
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3496606

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MCCLANATHAN, JEFFREY P.
100 SECOND AVE S
STE 600
ST. PETERSBURG FL 33701

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

FILE NOW: FEE IS \$61.259. 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 **D** ☐ Delete
NAME **WESLEY, JAMES**
STREET ADDRESS **1350 ORANGE AVENUE STE 247**
CITY-ST-ZIP **WINTER PARK FL 32789**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **D** ☐ Delete
NAME **MCCLANATHAN, JEFFREY P**
STREET ADDRESS **100 SECOND AVE., SOUTH, STE. 606**
CITY-ST-ZIP **ST. PETERSBURG FL 33701**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **D** ☒ Delete
NAME **WESLEY, JAMES A**
STREET ADDRESS **1030 N. ORANGE AVE., STE. 105**
CITY-ST-ZIP **ORLANDO FL 32801**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **D** ☐ Delete
NAME **SEXTON, DENNIS A**
STREET ADDRESS **801 SIXTH STREET SOUTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33701**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ 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:

2/21/02 727-821-6161

CR2E037 (9/01)