


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2004 08:00 AM
Secretary of State

DOCUMENT # N97000005301
 1. Entity Name
 HTR FOUNDATION, INC.



Principal Place of Business 100 SECOND AVE S STE 600 ST. PETERSBURG, FL 33701 US	Mailing Address 100 SECOND AVE S STE 600 ST. PETERSBURG, FL 33701 US
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02072004 No Chg-NP CR2E037 (10/03)

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4. FEI Number 59-3496606	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WESLEY, JAMES 1350 ORANGE AVENUE STE 247 WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCCLANATHAN, JEFFREY P 100 SECOND AVE., SOUTH, STE. 606 ST. PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SEXTON, DENNIS A 801 SIXTH STREET SOUTH SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 02/11/04-90029-004 61.25

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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: Jeffrey P. McClanathan Pres 2/5/04 727-821-6161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #