


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 03, 2005 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| DOCUMENT # N97000005301<br>1. Entity Name<br>HTR FOUNDATION, INC. |  |
|---|---|

|   |   |
|---|---|
| Principal Place of Business<br>100 SECOND AVE S<br>STE 600<br>ST. PETERSBURG, FL 33701 US | Mailing Address<br>100 SECOND AVE S<br>STE 600<br>ST. PETERSBURG, FL 33701 US |
|---|---|



02012005 No Chg-NP CR2E037 (10/03)

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|--|--|
| 4. FEI Number<br>59-3496606  | Applied For<br><input type="checkbox"/> 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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IN THIS SPACE**

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, 2005**

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

10. OFFICERS AND DIRECTORS

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>WESLEY, JAMES<br>1350 ORANGE AVENUE STE 247<br>WINTER PARK, FL 32789                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>MCCLANATHAN, JEFFREY P<br>100 SECOND AVE., SOUTH, STE. 606<br>ST. PETERSBURG, FL 33701 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>SEXTON, DENNIS A<br>801 SIXTH STREET SOUTH<br>SAINT PETERSBURG, FL 33701               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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IN THIS SPACE**

100000212878  
02/03/05-P0048-015 61.25

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: *J.P. Claret* Date: 1/31/05 Daytime Phone: 727-821-6161  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR