

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90165 048 ***150.00

DOCUMENT # P00000052324

1. Entity Name
HALLMARK CONCOURSE III, INC.



Principal Place of Business
8917 WESTERN WAY, SUITE 6
JACKSONVILLE, FL 32256

Mailing Address
8917 WESTERN WAY, SUITE 6
JACKSONVILLE, FL 32256

14003303



2. Principal Place of Business

6675 Corporate Center Pkwy

Suite, Apt. #, etc.

Suite 100

City & State
Jacksonville, FL

Zip
32216

Country

3. Mailing Address

6675 Corporate Center Pkwy

Suite, Apt. #, etc.

Suite 100

City & State
Jacksonville, FL

Zip
32216

Country

03212005 Chg-P CR2E034 (10/03)

4. FEI Number
59-3649713

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLEY, W. ALEX
8917 WESTERN WAY, SUITE 6
JACKSONVILLE, FL 32256

7. Name and Address of New Registered Agent

Name W. Alex Coley
Street Address (P.O. Box Number is Not Acceptable)
6675 Corporate Center Parkway
Suite 100
City Jacksonville FL Zip Code 32216

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME COLEY, W. ALEX
STREET ADDRESS 8917 WESTERN WAY, SUITE 6
CITY-ST-ZIP JACKSONVILLE, FL 32256 ☐ Delete

TITLE D
NAME CONN, JEFFREY A
STREET ADDRESS 8917 WESTERN WAY, SUITE 6
CITY-ST-ZIP JACKSONVILLE, FL 32256 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME Coley, W. Alex
STREET ADDRESS 6675 Corporate Center Pkwy, Ste 100
CITY-ST-ZIP Jacksonville, FL 32216 ☒ Change ☐ Addition

TITLE D
NAME Conn, Jeffrey A.
STREET ADDRESS 6675 Corporate Center Pkwy, Ste 100
CITY-ST-ZIP Jacksonville, FL 32216 ☒ Change ☐ Addition

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

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

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

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

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

W. Alex Coley 4/14/05 9043639002