

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2001 8:00 am
Secretary of State

07-24-2001 90004 017 ***150.00

DOCUMENT # P00000099701			
1. Entity Name HEIDI'S HIDEAWAY, INC.			
Principal Place of Business 11720 US HWY. 19 NORTH PORT RICHEY FL 34667		Mailing Address 11720 US HWY. 19 NORTH PORT RICHEY FL 34667	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt., #, etc.		Suite, Apt., #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3681472		Applied For <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		7. Name and Address of New Registered Agent	
MCCONNELL, WILLIAM 11720 US HWY. 19 NORTH PORT RICHEY FL 34667		Name MCCONNELL, WILLIAM	
		Street Address (P.O. Box Number is Not Acceptable) 11720 US HWY 19, SUITE 4	
		City PORT RICHEY	FL Zip Code 34668
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so: <input type="checkbox"/> <small>(See criteria on back)</small>		FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	
		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCCONNELL, WILLIAM 11720 US HWY. 19 NORTH PORT RICHEY FL 34667 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MCCONNELL, HEIDI 11720 US HWY. 19 NORTH PORT RICHEY FL 34667 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	✓ D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: SIGNATURE REQUIRED		William M. McConnell <small>Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	
		<small>Date</small> President <small>Daytime Phone #</small>	

CR2E034 (5/01)

Attachment

A0079284

P00000099701

White Dove Business & Financial Services

11720 U. S. 19, Suite 6

Port Richey, FL 34668

(727) 861-2722 FAX: (727) 861-2809

July 17, 2001

Division of Corporations

P. o. Box 1500

Tallahassee, FL 32302-1500

RE: Heidi's Hideaway, Inc.

P00000099701

**Please find enclosed the Uniform Business Report and a check for \$150.00.
Please note the address addition. My clients did not receive the report until
the other day. We request the reduction in fees for this reason. Thank you.**

***Please do not hesitate to contact me with any questions or information you
may need.***

Sincerely,



RICHARD A BOYKO, EA

Accountant