

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000102946

FILED
Apr 22, 2002 8:00 AM
Secretary of State

Entity Name: HISLAWS ENTERPRISES, INC.

Current Principal Place of Business:

511 RECKER HIGHWAY
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1516
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 59-3679209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHORT, PAUL R
7522 NORTH 40TH ST.
TAMPA, FL 33604

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAWS, JUDITH B
Address: 2010 SPIRIT LAKE RD.
City-St-Zip: WINTER HAVEN, FL 33880

Title: VSD () Delete
Name: LAWS, GEORGE W
Address: 2010 SPIRIT LAKE RD.
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDITH B. LAWS

PD

04/22/2002

Electronic Signature of Signing Officer or Director

Date