

2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Mar 29, 2002 8:00 am
Secretary of State

02-11-2002 90013 007 ***150.00

DOCUMENT # P00000116254	
1. Entity Name HUNTER MANAGEMENT, INC.	
Principal Place of Business 16 WHISTLING DUCK LANE KEY WEST FL 33040	Mailing Address 16 WHISTLING DUCK LANE KEY WEST FL 33040
2. Principal Place of Business 422 FLEMING ST Suite, Apt. #, etc.	3. Mailing Address 422 FLEMING ST Suite, Apt. #, etc.
City & State KEY WEST FL Zip 33040	City & State KEY WEST FL Zip 33040
4. FEI Number 52-2283968 Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	
7. Name and Address of New Registered Agent Name JOHN RICHARD SAUNDERS Street Address (P.O. Box Number is Not Acceptable) 422 FLEMING ST City KEY WEST FL Zip Code 33040	
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 <i>John Richard Saunders</i> JOHN RICHARD SAUNDERS - SEC. 3/11/02 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when applicable) DATE:...	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) A	
FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS SAUNDERS, JOHN R 16 WHISTLING DUCK LANE KEY WEST FL 33040 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JAMES, SUSAN 16 WHISTLING DUCK LANE KEY WEST FL 33040 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PALMER, JOANNA 682 PETALUMIA AVE #1-1 SEBASTOPOL CA 95472 ☐ 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
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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
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: <i>John Richard Saunders</i> JOHN RICHARD SAUNDERS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
Date JANUARY 22, 2001 Daytime Phone # 305 292 4834	



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)