

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 10, 2003 8:00 am**  
**Secretary of State**

09-10-2003 90055 049 \*\*\*150.00

0143857 AT

**DOCUMENT # P01000006916**

**1. Entity Name**  
**HEMMINGWAY HOMES, INC.**



**Principal Place of Business**  
**2516 WILLOUGHBY BLVD.**  
**STUART FL 34994**

**Mailing Address**  
**P.O. BOX 2473**  
**PALM CITY FL 34991**

**90155252**



**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** **65-1070853**

Applied For  
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**KNIERIM, MARY D**  
**6858 SW WEDELIA TERR.**  
**PALM CITY FL 34990**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

**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 \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>KNIERIM, MARY</b> <b>6858 WEDILIA TERR</b> <b>PALM CITY FL 34990</b>	<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		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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

**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

**9/4/03 772 215 3224**  
Date Daytime Phone #

CR2E034 (4/03)

Attachment

HEMMINGWAY HOMES, INC.  
An "Old Florida" Building Company

90155252  
P01000006916

Florida Department of State  
Division of corporations  
Uniform Business Report Filings  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

RE: Hemmingway Homes, Inc.  
Document # P01000006916  
FEI Number 65-1070853

Dear Sir or Madam:

I have received in the mail the Uniform business Report 2003 for Profit Corporation stating that the fee is now \$550.00 due before September 10, 2003 and this again will go up. Please note that I never received in the mail the first 2003 Uniform Business Report. As per your instructions, I am writing this letter to request that you waive this late fee and will accept my check for \$150.00 (enclosed) for the filing report of 2003.

If you have any questions, please contact me at (772) 215-3224.

Sincerely,

  
Mary Kiferim  
Hemmingway Homes, Inc.