

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90188 038 ***150.00

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DOCUMENT # P01000030774

1. Entity Name
THE HOBGOOD GROUP, CORP.



Principal Place of Business
**18455 MIRAMAR PARKWAY
212
MIRAMAR FL 33029**

Mailing Address
**18455 MIRAMAR PARKWAY
212
MIRAMAR FL 33029**

2. Principal Place of Business
18650 S.W. 39th Court

3. Mailing Address
18650 S.W. 39th Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miramar, FL

City & State
Miramar, FL

4. FEI Number **65-1088912**

Applied For
Not Applicable

Zip
33029

Country
Broward

Zip
33029

Country
Broward

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOBGOOD, BEVERLY J
18455 MIRAMAR PARKWAY
212
MIRAMAR FL 33029**

Name

Street Address (P.O. Box Number is Not Acceptable)
18650 S.W. 39th Court

City
Miramar

FL

Zip Code
33029

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 **Beverly J. Hobgood, President**

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

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☐ Delete
NAME **HOBGOOD, BEVERLY J**
STREET ADDRESS **18455 MIRAMAR PARKWAY #212**
CITY-ST-ZIP **MIRAMAR FL 33029**

TITLE **PSTD** ☐ Change ☐ Addition
NAME **HOBGOOD, BEVERLY J.**
STREET ADDRESS **18650 S.W. 39th Court**
CITY-ST-ZIP **Miramar, FL 33029**

TITLE **VP** ☐ Delete
NAME **HOBGOOD, CHARLES D**
STREET ADDRESS **18455 MIRAMAR PARKWAY #212**
CITY-ST-ZIP **MIRAMAR FL 33029**

TITLE **VP** ☐ Change ☐ Addition
NAME **HOBGOOD, CHARLES D.**
STREET ADDRESS **18650 S.W. 39th Court**
CITY-ST-ZIP **Miramar, FL 33029**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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: **Beverly J. Hobgood, President** 954-322-2877
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)