## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT #

P01000079232

1. Entity Name

JOHN HACKETT INC.



Principal Place of Business Mailing Address 24100 TURKEY LK RD. 24100 TURKEY LK RD. 11022711 HOWEY IN THE HILLS FL 34737 HOWEY IN THE HILLS FL 34737 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3735742 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HACKETT, JOHN Street Address (P.O. Box Number is Not Acceptable) 24100 TURKEY LK RD. **HOWEY IN THE HILLS FL 34737** City 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, 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 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE Change ☐ Addition HACKETT, JOHN NAME 24100 TURKEY LK RD. STREET ADDRESS **HOWEY IN THE HILLS FL 34737** CITY-ST-ZIP VD. ☐ Delete TITLE ☐ Change ☐ Addition RUSSO, DIANNA NAME 24100 TURKEY LK RD. STREET ADDRESS **HOWEY IN THE HILLS FL 34737** CITY+ST-ZIP STD ☐ Delete TITLE ☐ Change ☐ Addition HACKETT, DAVID J NAME 24100 TURKEY LAKE ROAD STREET ADDRESS **HOWEY IN THE HILLS FL 34737** CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP Delete TITI F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

## FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90994 040 \*\*\*150.00

SHONATURE

TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIF STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME

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.

4-25-03

Davtime Phone #