

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90649 044 ***150.00

DOCUMENT # P01000113566

1. Entity Name
SECOND HALF DEVELOPMENT, INC.



Principal Place of Business
**100 EAST SYBELIA AVE.
SUITE 255
MAITLAND FL 32751**

Mailing Address
**P.O. BOX 1612
SOLANA BEACH CA 92075**



2. Principal Place of Business

3. Mailing Address
6340 East Thomas Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 128

City & State

City & State
Scottsdale, AZ

Zip

Country

Zip

Country

85251 USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **91-2172429**

Applied For
Not Applicable

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

**HAGLE, CHAD A
100 EAST SYBELIA AVE.
SUITE 225
MAITLAND FL 32751**

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 \$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
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
HAGLE, CHAD A
P.O. BOX 1612
SOLANA BEACH CA 92075** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
Chad Hagle
6340 E. Thomas Rd. Suite 128
Scottsdale, AZ 85251** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
DUNN, DAMON J
243 MARGARITA AVE.
PALO ALTO CA 94306** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Damon Dunn
6340 E. Thomas Rd. Suite 128
Scottsdale, AZ 85251** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 REQUIRED
Chad Hagle, CEO

1/10/2003

440-945-5500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CP2E034 (10/02)