

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90733 022 ***150.00

030204 AV

DOCUMENT # P01000119124

1. Entity Name

HUNTER MORGAN COMMUNICATIONS, INC.



Principal Place of Business

**1060 ASPRI WAY
PALM BEACH GARDENS FL 33418**

Mailing Address

**1060 ASPRI WAY
PALM BEACH GARDENS FL 33418**

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

65-1159580

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

**MARTIN, RANDAL LEE
1060 ASPRI WAY
PALM BEACH GARDENS FL 33418**

7. Name and Address of New Registered Agent

Name

KEITH J HARRIS

Street Address (P.O. Box Number is Not Acceptable)

4839 SEA OATS CIR. #201

City

WEST PALM BEACH

FL

Zip Code

33417

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

Keith J Harris

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/03

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

TITLE **VPD** ☐ Delete
NAME **FLETCHER, SCOTT**
STREET ADDRESS **15742 CYPRESS PARK DRIVE**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **DCS** ☐ Delete
NAME **HARRIS, KEITH**
STREET ADDRESS **4839 SEA OATS CIRCLE, #201**
CITY-ST-ZIP **WEST PALM BEACH FL 33417**

TITLE **DT** ☒ Delete
NAME **MARTIN, RANDAL**
STREET ADDRESS **1060 ASPRI WAY**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE **P** ☐ Delete
NAME **CURTIN, THOMAS M**
STREET ADDRESS **67 BOLTON DRIVE**
CITY-ST-ZIP **DAWSONVILLE GA 30534**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

KEITH J HARRIS **KEITH J. HARRIS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/03

Date

(561) 301-5586

Daytime Phone #

CR2E034 (10/02)