

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

FILED
Mar 11, 2003 8:00 am
Secretary of State

03-11-2003 90136 032 ***150.00

DOCUMENT # P02000012285

1. Entity Name
HARTLAND CABLE SERVICES, INC.



Principal Place of Business
17604 STERLING TERR
REDINGTON SHORES FL 33708

Mailing Address
17604 STERLING TERR
REDINGTON SHORES FL 33708



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

30-0060687

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

HICKS, B.
152 8TH AVE SW STE 2A
LARGO FL 33770

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORSE, CRAIG E	NAME	
STREET ADDRESS	17604 STERLING TERR	STREET ADDRESS	
CITY-ST-ZIP	REDINGTON SHORES FL 33708	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-03 419 541-1819

Date

Daytime Phone #

CR2E034 (10/02)

Attachment 80052119
#P020000122 85

OHIO CERTIFICATE OF TITLE	
STATE OF OHIO No. 9900279076	
ORIGINAL	
ISSUING CITY: HURON RESIDENT CITY: HURON	
ISSUE DATE: 04/10/2002	
IDENTIFICATION NUMBER: 1B6MF36G2RS670299	
YEAR: 1994 MAKE: DODGE MAKE DESCRIPTION: DODGE	
PURCHASE PRICE: \$15,000.00 BODY TYPE: TK MODEL: 350 MODEL DESCRIPTION: RAM TRUCK 350	
TAX: \$975.00 MILEAGE: 69,000 EVIDENCE: MI 228N0390486T	
CONVERSION: MILG BRAND: ACTUAL	
OWNER: CRAIG E MORSE	
1506 ZENOBIA ROAD NORWALK OH 44857	
PREVIOUS OWNER: CABLE ENTERPRISE INC	
2549 JOLLY ROAD STE 320 OKEMOS MI 48864	
LICENSE EXPIRES: PDG 2028	
TRANSFER ISSUED: 5-03	
TRUCK WT: 5-03	
Registrar of motor vehicle	
THE GREAT SEAL OF THE STATE OF OHIO	
VOID IF ALTERED	
LIEN DISCHARGE	
Lienholder:	
by:	
date:	
Authorized signature:	
CLERK OF COURTS LIEN CANCELLATION	
by:	
date:	
Deputy Clerk:	
date:	
WITNESS MY HAND AND OFFICIAL SEAL THIS 10th DAY OF APRIL, 2002	
7057048638	
KATHLEEN L WALCHER	
CLERK OF COURTS	
DO NOT ACCEPT TITLE SHOWING ANY ERASURES, ALTERATIONS OR MUTILATIONS.	