


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90205 007 ***158.75

DOCUMENT # P02000121310		
1. Entity Name HF MARKETING, INC.		
Principal Place of Business 451 CENTRAL PARK DR. LARGO, FL 33771 US	Mailing Address 451 CENTRAL PARK DR. LARGO, FL 33771 US	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent CALLAHAN, JACK M 451 CENTRAL PARK DR. LARGO, FL 33771		



04272004 No Chg-P CR2E034 (10/03)

4. FFI Number 32-0044581	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when converting) DATE _____

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

(NOTE: Registered Agent signature required when converting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D.P. FRENCH, HELEN 451 CENTRAL PARK DR LARGO, FL 33771 PO Box 8228 Joplin MO 64801
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IN THIS SPACE**

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: *HELEN FRENCH*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HELEN FRENCH

Date

Daytime Phone #

4-27-04

417-626-2324