

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061921

Entity Name: HND ENTERPRISE CORP

FILED  
Mar 16, 2009  
Secretary of State

## Current Principal Place of Business:

4017 W. MARTIN LUTHER KING, JR. BLVD  
TAMPA, FL 33614

## New Principal Place of Business:

## Current Mailing Address:

4017 W. MARTIN LUTHER KING, JR. BLVD  
TAMPA, FL 33614

## New Mailing Address:

FEI Number: 74-3096290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMPBELL, HUGH S  
4445 HIDDEN SHADOW DRIVE  
TAMPA, FL 33614 US

## Name and Address of New Registered Agent:

MCPHAIL, PAULINE R  
4017 W DR MARTIN LUTHER KING BLVD  
TAMPA, FL 33614 US

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.

SIGNATURE: PAULINE R MCPHAIL

03/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CAMPBELL, HUGH S  
Address: 4445 HIDDEN SHADOW DRIVE  
City-St-Zip: TAMPA, FL 33614

Title: VP ( ) Delete  
Name: ABDALLAH, NORMAN J  
Address: 5516 RAVEN COURT  
City-St-Zip: TAMPA, FL 33625

Title: TREA ( ) Delete  
Name: STEPHENS, DWIGHT R  
Address: 2118 RIDGEMORE DRIVE  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CAMPBELL, HUGH S  
Address: 5709 INTERBAY BLVD  
City-St-Zip: TAMPA, FL 33611

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAULINE MCPHAIL

MS

03/16/2009

Electronic Signature of Signing Officer or Director

Date