

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 24, 2004 8:00 am
Secretary of State

05-03-2004 90661 020 ***150.00

66423645



MOORE CR2E034 (11/03)

DOCUMENT # P03000124791 1. Entity Name HARDIN PAVING, INC.																																																																																															
Principal Place of Business 3414 DR LOVE RD ORLANDO FL 32810			Mailing Address 3414 DR LOVE RD ORLANDO FL 32810																																																																																												
2. Principal Place of Business 3414 DR LOVE RD <small>Suite, Apt. #, etc.</small>		3. Mailing Address SAME <small>Suite, Apt. #, etc.</small>																																																																																													
City & State ORLANDO FL		City & State 		4. FEI Number 52-2419168																																																																																											
Zip 32810		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 <small>Additional Fee Required</small>																																																																																											
6. Name and Address of Current Registered Agent HARDIN, HOLLY S 3414 DR LOVE RD ORLANDO FL 32810			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																																																																																												
8. The above 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, the registered agent.																																																																																															
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE _____</small>																																																																																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 <small>May Be Added to Fees</small>																																																																																												
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;">Delete <input type="checkbox"/></td> </tr> <tr> <td></td> <td>OWNER HOLLY S. HARDIN</td> <td>3414 DR LOVE RD</td> <td>ORLANDO, FL 32810</td> <td></td> </tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete <input type="checkbox"/>		OWNER HOLLY S. HARDIN	3414 DR LOVE RD	ORLANDO, FL 32810																																					11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																								
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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: <u><i>Holly S. Hardin</i></u> March 10, 2004 (407) 294-7140 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																															