

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2005 8:00 am
Secretary of State

07-07-2005 90008 044 ***150.00

DOCUMENT # P04000163042 1. Entity Name HART HOLDINGS INC.					
Principal Place of Business 723 EAGLE POINT DRIVE VENICE, FL 34285			Mailing Address 723 EAGLE POINT DRIVE VENICE, FL 34285		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-1951033	
Zip		Zip		5. Certificate of Status Desired: <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HART, ROGER W 723 EAGLE POINT DRIVE VENICE, FL 34285				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 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when naming)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HART, ROGER W 723 EAGLE POINT DRIVE VENICE, FL 34285	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HART, BECKY J 723 EAGLE POINT DRIVE VENICE, FL 34285	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HART, BRIAN C 723 EAGLE POINT DRIVE VENICE, FL 34285	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(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>Becky J. Hart</u> <u>Becky J. Hart</u> <u>7/5/05</u> <u>941-544-7984</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dorsum Phone #</small>					

66025085

ATTACHMENT

66025085

Division of Corporations
P.O. Box 1500
Tallahassee, FL. 32302-1500


July 25, 2005

Reference Number: P04000163042

As indicated on the form I submitted, I did not receive the first filing that was sent by your office. Therefore I am requesting that you abate the \$400.00 penalty and consider my account paid in full.

Thank you for your consideration.

Sincerely,



Becky Hart
Hart Holdings
FEI#20-1951033