

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128923

FILED  
May 18, 2010  
Secretary of State

**Entity Name:** HEART OF TAMPA DEVELOPMENT, INC.

**Current Principal Place of Business:**

101 MAIN ST STE B  
SAFTEY HARBOR, FL 34695

**New Principal Place of Business:**

101 MAIN STREET, SUITE B  
SAFTEY HARBOR, FL 34695

**Current Mailing Address:**

101 MAIN ST STE B  
SAFTEY HARBOR, FL 34695

**New Mailing Address:**

101 MAIN STREET, SUITE B  
SAFTEY HARBOR, FL 34695

**FEI Number:** 20-3512732

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WELDON, ROBERT M  
101 MAIN ST STE B  
SAFTEY HARBOR, FL 34695 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WELDON, ROBERT M  
Address: 101 MAIN ST STE B  
City-St-Zip: SAFTEY HARBOR, FL 34695

Title: T  
Name: WELDON, ROBERT M  
Address: 101MAIN ST STE B  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S  
Name: WELDON, ROBERT M  
Address: 101 MAIN ST STE B  
City-St-Zip: SAFETY HARBOR, FL 34695

I hereby 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 all other like empowered.

SIGNATURE: ROBERT M WELDON

P

05/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date