

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P05000134887

1. Entity Name

H.G. PROPERTIES TAMPA, INC.



FILED
Apr 30, 2007 08:00 AM
Secretary of State

Principal Place of Business

5150 PALM VALLEY ROAD
SUITE 100
PONTE VEDRA BEACH FL 32082

Mailing Address

5150 PALM VALLEY ROAD
SUITE 100
PONTE VEDRA BEACH FL 32082



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 37-1516067

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CRABTREE, R R
8777 SAN JOSE BOULEVARD
BUILDING A, SUITE 200
JACKSONVILLE FL 32217

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

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

(NOTE: Registered Agent signature required when re-instating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME MCMENAMY, JOHN PRES
STREET ADDRESS 5150 PALM VALLEY ROAD, SUITE 100
CITY- ST- ZIP PONTE VEDRA BEACH FL 32082

TITLE VP ☐ Delete
NAME MCMENAMY, JOHN VP
STREET ADDRESS 5150 PALM VALLEY ROAD, SUITE 100
CITY- ST- ZIP PONTE VEDRA BEACH FL 32082

TITLE S/T ☐ Delete
NAME MCMENAMY, JOHN S/T
STREET ADDRESS 5150 PALM VALLEY ROAD, SUITE 100
CITY- ST- ZIP PONTE VEDRA BEACH FL 32082

TITLE D ☐ Delete
NAME MCMENAMY, JOHN D
STREET ADDRESS 5150 PALM VALLEY ROAD, SUITE 100
CITY- ST- ZIP PONTE VEDRA BEACH FL 32082

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000741029
CITY- ST- ZIP 05/15/07-80012-011 150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

John M. Menamy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/07 904 278 3939
Date Daytime Phone