

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005635

Entity Name: HMR CONSULTING, INC.

FILED
Jan 24, 2007
Secretary of State

Current Principal Place of Business:

19653 FLORANTINE CIRCLE
CLERMONT, FL 34715

New Principal Place of Business:

220 N KIRKMAN RD
SUITE B
ORLANDO, FL 32811

Current Mailing Address:

19653 FLORANTINE CIRCLE
CLERMONT, FL 34715

New Mailing Address:

220 N KIRKMAN RD
SUITE B
ORLANDO, FL 32811

FEI Number: 20-4147460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCALARNEY, NANCY A
219 CLYDE STREET
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

RAPAPORT, MICHELE S
220 N KIRKMAN RD
SUITE B
ORLANDO, FL 32811 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: MICHELE S RAPAPORT

01/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RONCHETTI, HELEN
Address: 19653 FLORANTINE CIRCLE
City-St-Zip: CLERMONT, FL 34715

Title: VST (X) Delete
Name: RAPAPORT, MICHELE
Address: 14726 GOURD NECK DRIVE
City-St-Zip: MONTEVERDE, FL 34756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RAPAPORT, MICHELE S
Address: 220 N KIRKMAN RD STE B
City-St-Zip: ORLANDO, FL 32811

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHELE S RAPAPORT

PD

01/24/2007

Electronic Signature of Signing Officer or Director

Date