

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # P93000005930 1. Entity Name HART DYNAMICS, INCORPORATED |  |
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|--|--|
| Principal Place of Business 609 SECOND AVE DESTIN, FL 32541 | Mailing Address 609 SECOND AVE DESTIN, FL 32541 |
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DO NOT WRITE IN THIS SPACE



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|------------------------------------|--------------------------|---------------------------------------|
| 02152008 | No Chg-P | CR2E034 (11/05) |
| 4. FEI Number 59-3164994 | <input type="checkbox"/> | Applied For Not Applicable |
| 5. Certificate of Status Desired | <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**FLEET, H. BART ATTY.
 FLEET, SPENCER, MARTIN & KILPATRICK, PA
 1104 EGLIN PARKWAY
 SHALIMAR, FL 32579-0000**

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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 _____ (NOTE, Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

U00000945322
 05/30/08-80004-002 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PCEO HART, PETER D 609 SECOND AVE. DESTIN, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | ST HERIGODT, GLORIA M 609 2ND AVE. DESTIN, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 