FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

71 SHADOW LANE

LAKELAND FL 33813



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000045309 (8)

HPJ DEVELOPMENT COMPANY, INC.

Principal Place of Business		Mailing Address			- I TORATORN HA (GLAL BANK) MAKA MAKA MENU M	T TORKINDED THE COLOUR BANKS BRINS BRINS BRINS BANKS BRINS BYOND CHIKE CRIME TRIL HERE	
- CONSTANTO THELE DEVO		1905 S FLORIDA AVE LAKELAND FL 33803 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/06/1995			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 1905	1905 S. FLORIDA AYE. 26				59-3321143	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	LAND FL	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 338		Zip 3	Countr 0	У	This corporation owes or has paid to Personal Property Tax due June 30	. Yes No	
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
MARPER, ROBERT F IV- 2010 LAKELAND HILLS BLVD LAKELAND FL 33803				81 Name R. GUERRY JONES 82 Street Address (P.O. Box Number is Not Acceptable) 1905 S. PLORIDA AVE.			
			84	0.50	AKELAND	FL 85 Zip Code 33803	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes.							
					equired when reinstating)	4/21/98 DATE	
12.	OFFICERS AND	***************************************	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	D	DELETE	1.1 TITLE	[Change	
NAME	HARPER, ROBERT F IV		1.2 NAME				
STREET ADDRESS	2010 2 1122 110 1111111		1.3 STREE	T ADDRESS	5742 COVEVIEW DR.	742 COVEYIEW DR.	
CITY-ST-ZIP	-LAKELAND FL 33805 -		1.4 CITY-	ST-ZIP	LAKELAND FL 338	303	
TITLE	D	DELETE	21 TITLE	1	•	Change Addition	
NAME	JONES, RICHARD G		2.2 NAME				
STREET ADDRESS	1905 SOUTH FLORIDA AVENU	JE	2.3 STREE	T ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33803		2. 4 CITY				
TITLE	D	☐ DELETE	3.1 TITLE			Change Addition	
NAME	PETTERSON, JOHN E		3.2 NAME				

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE 4. 2 NAME

5.1 TITL€

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

Change

Change

Change

☐ Addition

Addition

Addition

FILED

May 05 1998 8:00am

Secretary of State