2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

1905 S. FLORIDA AVENUE

LAKELAND FL 33803

P95000045309 DOCUMENT

1. Entity Name

Principal Place of Business

1905 S. FLORIDA AVENUE

2. Principal Place of Business

LAKELAND FL 33803

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

HPJ DEVELOPMENT COMPANY, INC.



FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90146 047 ***150.00

10004251



DATE

☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For 59-3321143 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)

JONES, R. GUERRY 1905 S. FLORIDA AVENUE LAKELAND FL 33803

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.

City

(NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00

Country

6. Name and Address of Current Registered Agent

9. Election Campaign Financing

\$5.00 May Be Added to Fees

Zip Code

After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition JONES, R. GUERRY NAME NAME STREET ADDRESS 1905 S. FLORIDA AVENUE STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33803 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HERRING, JERRY NAME STREET ADDRESS 235 N. KENTUCKY AVENUE, #B STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33801 CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _/

"UPSIDEOUR! GUERRY JONES GNATURE AND TYRET OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

863-682-5151