2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000070989

1. Entity Name

THE HAYES NORTHLAKE BUILDING, INC.



Principal Place of Business

Mailing Address

4365 NORTHLAKE BLVD PALM BEACH GARDENS, FL 33410

211

4365 NORTHLAKE BLVD

PALM BEACH GARDENS, FL 33410

03

FILED Mar 03, 2004 08:00 AM Secretary of State



02232004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0606069 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAYES, NEIL J 4365 NORTHLAKE BLVD PALM BEACH GARDENS, FL 33410

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 The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the state of Fibrida. I am annual with and accept the obligations of registered agent. 								
SIGNATURE_	Signature, typed or printed name of registered agent and title i	f applicable	(NOTE R	legistered A	gent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution				ing 🔲	\$5.00 May Be Added to Fees	03/03/04-80018-009 150.00		
10.	OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY ST 2IP	PD HAYES, NEIL J 4365 NORTHLAKE BLVD PALM BEACH GARDENS, FL							
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPST HAYES, REBECCA W. 4365 NORTHLAKE BLVD PALM BEACH GARDENS, FL	···						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				į	DO NOT WRITE IN THIS SPACE			
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TITLE NAME STREET ADDRESS CITY ST ZIP								
TITLE NAME STREET ADDRESS 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)(1). 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.								

G OFFICER OR DIRECTOR