

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000015217

FILED
Jan 06, 2003
Secretary of State

Entity Name: HLA MARKETING COMMUNICATIONS, INC.

Current Principal Place of Business:

500 N. WESTSHORE BLVD., STE. 525
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

500 N. WESTSHORE BLVD., STE. 525
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-3375696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLYKER, ASHLEIGH
500 N. WESTSHORE BLVD., STE. 525
TAMPA, FL 33609

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SLYKER, ASHLEIGH W
Address: 3910 W SAN RAFAEL ST
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: THOMASON, KIM V
Address: 1715 DOVE FIELD PLACE
City-St-Zip: BRANDON, FL 33510

Title: D () Delete
Name: HARRISON, PATRICK R
Address: 9259 122ND TERRACE
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SLYKER, ASHLEIGH W
Address: 1902 SEAN WOOD CIR
City-St-Zip: BRANDON, FL 33510

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

Title: D (X) Change () Addition
Name: HARRISON, PATRICK R
Address: 2205 BRIANA DR.
City-St-Zip: BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ASHLEIGH SLYKER

D

01/06/2003

Electronic Signature of Signing Officer or Director

Date