

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90040 021 ***150.00

DOCUMENT # P96000023797

1. Entity Name

HDC ENTERPRISES, INC.

Principal Place of Business

**2432 EAST SEMINOLE BLVD
 APOPKA FL 32703
 US**

Mailing Address

**POST OFFICE BOX 15110
 DAYTONA BEACH FL 32115**

2. Principal Place of Business

2827 Ballard Avenue

3. Mailing Address

2827 Ballard Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, Florida

City & State

Orlando, Florida

4. FEI Number

59-3367072

Applied For

Not Applicable

Zip

32833-4037

Country

Zip

32833-4037

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**ROST, SCOTT R
 228 PARK AVE N
 SUITE B
 WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

Name

Scott R. Rost

Street Address (P.O. Box Number is Not Acceptable)

836 N. Highland Avenue

City

Orlando

FL

Zip Code

32803

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.

SIGNATURE

Scott R. Rost

April 17, 2002

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **EDWARDS, HOWARD KEAY**
 STREET ADDRESS **2827 BALLARD AVENUE**
 CITY-ST-ZIP **ORLANDO FL 32833-4037**

TITLE **PVP** ☐ Delete
 NAME **EDWARDS, HOWARD K**
 STREET ADDRESS **2727 BALLARD AVE.**
 CITY-ST-ZIP **ORLANDO FL 32833-4037**

TITLE **ST** ☐ Delete
 NAME **EDWARDS, CAROL A**
 STREET ADDRESS **2827 BALLARD AVE.**
 CITY-ST-ZIP **ORLANDO FL 32833-4037**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **2827 Ballard Ave.**
 CITY-ST-ZIP **Orlando, FL 32833-4037**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Howard K. Edwards
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/17/02 407-667-3712

CR2E034 (9/01)