

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000048360

1. Entity Name

HIPPS REALTY, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90043 003 ***150.00

Principal Place of Business	Mailing Address
LAND O'LAKES BLVD LAND O'LAKES FL 34639	3208 LAND O'LAKES BLVD LAND O'LAKES FL 34639 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	59-3399044	Applied For
		Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HIPPS, DAVID E SR 3208 LAND O'LAKES BLVD LAND O'LAKES FL 34639		Name: David E. Hipps Jr. Street Address (P.O. Box Number is Not Acceptable): 3208 Land O'lakes Blvd. City: Land O'lakes, FL Zip Code: 34639	

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: David E Hipps Jr. DATE: 4-25-00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D NAME: HIPPS, DAVID E SR STREET ADDRESS: 3208 LAND O'LAKES BLVD CITY-ST-ZIP: LAND O'LAKES FL	<input checked="" type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: HIPPS, DAVID E JR STREET ADDRESS: 3208 LAND O'LAKES BLVD CITY-ST-ZIP: LAND O'LAKES FL	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: David E Hipps Jr. DATE: 4-25-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)