## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000059244 (9)

H/M VENTURES, INC.

## **FILED** Apr 29 1997 8:00am Secretary of State



Source Application of Sequence	Principal Place of Business 1527 SECOND STREET SARASOTA FL 34236	1527 SE	Address COND STREET DTA FL 34238-8503				<b>       </b>	
2. Principal Frace of Business   2a. Making Address   2. Principal Fraction   2. Surv. Apt. F. etc.   3. Cyrificate of Seque Desired   \$8.75 Additional Fee Required   \$8.75 Additional Fee							3a. Date of Las	t Report
Country	Principal Place of Busine 21	26				4. FEI Number		Not Applicable
Trust Puro Covers button   Accided to Fees   Trust Puro Covers button   Trust Puro Covers		Suit	te, Apt. #, etc.		V 38	5. Certificate of Status Desired		
S. Name and Address of Current Registered Agent HOYT, GARY B 1527 SECOND STREET SARASOTA FL 34236  19	City & State		/ & State					
HOYT, GARY B  1527 SECOND STREET SARASOTA FL 34236  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  64 City  FL 85 Zip Code  65 Zip Code  66 City  FL 85 Zip Code  67 Zip Code  67 Zip Code  68 Zip Code  69 Zip Code  69 Zip Code  69 Zip Code  60	<b></b>	¬		Country				r s. 199.032,
11. Pursurent to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the objective appointment as registered agent and accept the object of Such Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the object of Such Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the object of Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. THE CHANGES STANDED STREET SARASOTA FL 34238  1527 SECOND STREET  12. SIRRET ADDRESS  12. SIRRET ADDRESS  12. SIRRET ADDRESS  12. SIRRET ADDRESS  13. SIRRET ADDRESS  14. CITY-S1-ZP  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change Addition  17. Addition  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Change Addition  19	9. Name a			1				
SECOND STREET   SARASOTA FL 34236     82   Street Address (P.O. Box Number is Not Acceptable)     83			Т	B1 N	Name		<del></del>	
Bay	1527 SECOND S			82 5	Street Addres	ss (P.O. Box Number is Not Accepta	ble)	
B4 City	' SARASOTA FL 3	4236						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered apent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of . Section 607.0505, Florida Statutes.  SIGNATURE    Signature type of period name of registered agent and tax 4 applicable   (NOTE Registered Agent signature required when renating)   DATE				03				
11. Pursuant to the provisions of Sections 607.0502 and 607.1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent office or registered agent to both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent with, and accept the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. In the state of registered agent				84 (	City		F1 85 Z	ip Code
DELETE	SIGNATURE				_			as registered
NAME   HOYT, GARY B   12 NAME   13 STREET ADDRESS   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP	12.	OFFICERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFI		
13.5TREET ADDRESS   15.27 SECOND STREET   13.5TREET ADDRESS   14.0(TY-ST-ZIP		N/ P	☐ DELETE	1.1 TITLE			☐ Chang	je 🔲 Addition
SARASOTA FL 34236								
DELETE   DELETE   2.1 TITLE   Change   Addition	CARACOTA					•		
MOORE, RUSSELL   1527 SECOND STREET   23 STREET ADDRESS   24 CITY-SI-ZIP		116 41644	DELETE		ar	. *************************************	Chang	e Addition
Coling   Coling   Change   Addition		USSELL		2.2 NAME		Y		_
DELETE   DELETE   STITULE   Change   Addition			J	2.3 STREET AD	DRESS			
NAME	CHY-SI-ZIP SARASOTA	FL 34238	<b>,</b>	2. 4 City-St-	ZiP			
33 STREET ADDRESS   34 CITY - ST - ZIP	TITLE		L_J DELETÉ				L. Chang	je 🔲 Addition
34.GITY-ST-ZIP	NAME							
DELETE	1				1			
A3 STREET ADDRESS   A4 CITY-ST-ZIP   A4 CITY-ST-ZIP   ADDRESS   A4 CITY-ST-ZIP   ADDRESS   A4 CITY-ST-ZIP   ADDRESS   A CITY-ST-ZIP   A CITY	Till(f		DELETE		50		Chang	ge Addition
Addition	NAME			4. 2 NAME				
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CITY-ST-ZIP 6.4 CITY-ST-ZIP	Titut		DELETE					
CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME			6.2 NAME		<b>つししししご 1 b</b>	04045 01045	
CHY - ST - 74P 6.4 CHY - ST - 74P	STREET ADDRESS			6.3 STREET AD	DRESS	- 100/01/31-7018 ***82 50	U477U43	
14. I do 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	CITY ST-ZIP					***************************************		

information indicated on this annual report or supplemental annual 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 12 or Block 13 if chapter 607, and that my name address.

SIGNATURE: