FILE NOW: FILING FEE AFTER MAY 1ST IS \$55

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT O

STATE Sandra B. Mortha

Secretary of State DIVISION OF CORPORATIONS

1998

P96000101978 (0)

Principal Place of Business	Mailing Address	•
2950 TEAL LANE CLEARWATER FL 34622	2950 TEAL LANE CLEARWATER FL 34622	

FILED May 07 1998 8:00am Secretary of State

DOCUMENT # HARDY INVESTMENT GROUP OF FLORIDA, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEL Number Applied For 21 26 59-3424000 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JONES, CHRISTIE S ESQ. 1819 **NEEDLES** LANE 82 LARGO FL 33779 64 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 agent, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE HARDY, PETER J NAME 1.2 NAME STREET ADDRESS **295**0 TEAL LANE 1.3 STREET ADDRESS **CLEARWATER FL 34622** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change 21 THLE Addition TITLE HARDY, PATRICIA K NAME 2.2 NAME 2950 TEAL LANE STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL 34622** CITY-ST-ZIP 2.4 CITY - S1 - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-\$1-ZIP 5.4 CITY ST-ZIP DŁLETE ☐ Change Addition TITLE 61 TITLE 62 NAME NAME 6.3 STRIFT ADDRESS STREET ADDRESS CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exe indicated on this annual report or supplemental innual report is true and accurate and officer or director of the corporation or the receiver in this stee empowered to execute the Block 12 or Block 13 if changed, or man attachment with an officer. ption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information hat my signature shall have the same legal effect as if made under oath; that I am an report as required by Chapter 607, Florida Statutes; and that my name appears in