

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90129 004 ***150.00

DOCUMENT # P97000019591

1. Entity Name
HINKLEY CONSULTING, INC.



Principal Place of Business
**4301 N OCEAN BLVD
UNIT A1608
BOCA RATON FL 33431
US**

Mailing Address
**ADLER POLLOCK & SHEEHAN P.C.
2300 BANKBOSTON PLAZA
PROVIDENCE RI 02903
US**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **06-1484675**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WILSON, CHARLES S. 4301 N OCEAN BLVD UNIT A1608 BOCA RATON FL 33431 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD WILSON, DOLORES DOLORES 4301 N OCEAN BLVD UNIT A1608 BOCA RATON FL 33431 <input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition WILSON, DOLORES
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED PRESIDENT, DOLORES WILSON 2-14-03 401 965-7862
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

ADLER POLLOCK & SHEEHAN P.C.

70019947
P97000019591

2300 Financial Plaza
Providence, RI 02903-2443
Telephone 401-274-7200
Fax 401-751-0604 / 351-4607

175 Federal Street
Boston, MA 02110-2890
Telephone 617-482-0600
Fax 617-482-0604
www.apslaw.com

February 21, 2003

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Uniform Business Report Filings
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: *Hinckley Consulting, Inc.*
FEI: 06-1484675

Dear Sir/Madam:

Enclosed for filing is the 2003 Uniform Business Report for the above-referenced corporation, together with a check in the amount of \$150.00, to cover the requisite filing fee. Kindly date-stamp the enclosed photocopy of the 2002 Uniform Business Report to acknowledge its receipt and filing and return it to me in the self-addressed return envelope provided. If there are any problems or you have any questions, please call me at 401-274-7200. Thank you in advance for your assistance with this matter.

Sincerely,


CAROLE M. JOHNSTON
Legal Assistant

Enclosures

cc: Mr. Charles S. Wilson
E. Hans Lundsten, Esq.

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