

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000002697

Entity Name: HGL PROPERTIES G.P., INC.

FILED  
Apr 08, 2009  
Secretary of State

## Current Principal Place of Business:

8120 NATIONS WAY  
STE 202  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

## Current Mailing Address:

8120 NATIONS WAY  
STE 202  
JACKSONVILLE, FL 32216

## New Mailing Address:

FEI Number: 59-3494192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REINSCH, MARK A ESQ  
2700 LAKE SHORE BLVD  
JACKSONVILLE, FL 32210 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SMITH, JAMES P JR  
Address: 8120 NATIONS WAY STE 202  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: NEWTON, RUSSELL B JR  
Address: 1400 W. FORSYTH STREET., STE 1600  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D ( ) Delete  
Name: NEWTON, RUSSELL B III  
Address: 1400 W. FORSYTH STREET., STE 1600  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D ( ) Delete  
Name: MANN, WILLIAM R  
Address: 1400 W. FORSYTH STREET., STE 1600  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D ( ) Delete  
Name: STOUT, WILLIAM W  
Address: 8120 NATIONS WAY., STE 202  
City-St-Zip: JACKSONVILLE, FL 32216

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM W STOUT

VP

04/08/2009

Electronic Signature of Signing Officer or Director

Date