

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90062 035 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000005689**

1. Entity Name

Hard Labor Land & Timber Company, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1963 Hard Labor Rd
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 10
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Chipley, FL

City & State

Wausau, FL

4. FEI Number

59-3504007

Applied For

Not Applicable

Zip

32428

Country

Zip

32463

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Everett, Ted S

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

1963 Hard Labor Rd.

City

Chipley

FL

Zip Code

32428

8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1 Fees \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
Everett Ted S
Post office Box 10
Wausau, FL 32463**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address and all other like empowerment.

SIGNATURE: **Ted S. Everett**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/26/02

Daytime Phone #

850 638 4961

CR2E034B (12/01)