

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90030 040 ***150.00

DOCUMENT # P98000015197

1. Entity Name

HEARTLAND INVESTMENTS, INC.

Principal Place of Business

**507 8TH STREET SOUTH
 DUNDEE FL 33838**

Mailing Address

**507 8TH STREET SOUTH
 DUNDEE FL 33838**

2. Principal Place of Business

1574 Auburn Oaks Ct

3. Mailing Address

1574 Auburn Oaks Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Auburndale FL

City & State

Auburndale FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

33823

Country

USA

Zip

33823

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

BROWN, PETER L

**507 8TH STREET SOUTH
 DUNDEE FL 33838**

7. Name and Address of New Registered Agent

Name **Peter L. Brown**

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

1574 Auburn Oaks Ct

City

Auburndale

FL

Zip Code

33823

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.

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) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

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 **D** ☐ Delete
 NAME **BROWN, PETER L**
 STREET ADDRESS **507 8TH STREET SOUTH**
 CITY-ST-ZIP **DUNDEE FL 33838**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☒ Change ☐ Addition
 NAME **Peter L. Brown**
 STREET ADDRESS **1574 Auburn Oaks Ct**
 CITY-ST-ZIP **Auburndale FL 33823**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with an office, like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)