
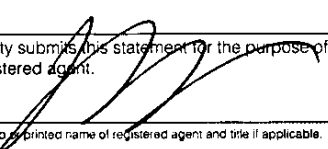
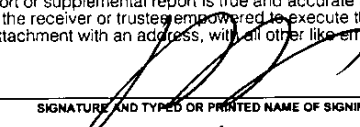


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 08, 2007 8:00 am**  
**Secretary of State**

05-08-2007 90014 050 \*\*\*150.00

DOCUMENT # P98000027971					
<b>1. Entity Name</b> HRCF, INC.					
<b>Principal Place of Business</b> 15500 ROOSEVELT BLVD. SUITE 303 CLEARWATER, FL 33760			<b>Mailing Address</b> 15500 ROOSEVELT BLVD. SUITE 303 CLEARWATER, FL 33760		
<b>2. Principal Place of Business - No P.O. Box #</b> 4592 Wilmerton Road		<b>3. Mailing Address</b> 4592 Wilmerton Road			
Suite, Apt. #, etc. Suite 100		Suite, Apt. #, etc. Suite 100			
City & State Clearwater, FL		City & State Clearwater, FL			
Zip 33762		Country USA		04242007    Chg-P    CR2E034 (12/06)	
<b>4. FEI Number</b> 59-3501994			Applied For <input type="checkbox"/> Not Applicable		
<b>5. Certificate of Status Desired</b>			<input type="checkbox"/> \$8.75 Additional Fee Required		
<b>6. Name and Address of Current Registered Agent</b> HAYDON, ROGERS K JR. 15500 ROOSEVELT BLVD. STE 303 CLEARWATER, FL 33760			<b>7. Name and Address of New Registered Agent</b> Name: HAYDON, ROGERS K. JR. Street Address (P.O. Box Number is Not Acceptable): 4592 Wilmerton Road Suite 100 City: Clearwater FL Zip: 33762		
<b>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.</b>					
SIGNATURE: 				DATE: 4/25/07	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS RUBIN, LESLIE A 15500 ROOSEVELT BLVD. STE 303 CLEARWATER, FL 33760		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4592 Wilmerton Road, Suite 100 Clearwater, FL 33762	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT HAYDON, ROGERS K JR. 15500 ROOSEVELT BLVD. STE 303 CLEARWATER, FL 33760		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4592 Wilmerton Road, Suite 100 Clearwater, FL 33762	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUTLER, MELVIN S 35388 US HWY 19 NORTH PALM HARBOR, FL 34684		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, THOMAS 128 S. CLYDE AVE. KISSIMMEE, FL 34741		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b>					
SIGNATURE: 				DATE: 4/25/07    727-539-0777	
Signature, typed or printed name of signing officer or director					
Rogers K. Haydon, Jr.					