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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000059587

1. Corporation Name

HADLEY CONSULTING, INC.

Principal Place of Business

Mailing Address

1055 N DIXIE FREEWAY STE 4
NEW SMYRNA BEACH FL 32168

1055 N DIXIE FREEWAY STE 4
NEW SMYRNA BEACH FL 32168

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/06/1998

4. FEI Number

59-3535280

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☒ No

2. Principal Place of Business

21 2008 CORNELL PL.

2a. Mailing Address

26 2008 CORNELL PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

FL

27 City & State

FL

23 DAYTONA BEACH

28 DAYTONA BEACH

Zip

Country

Zip

Country

24 32124

25

USA

29 32124

30

USA

9. Name and Address of Current Registered Agent

BRUMER, BARRY N
1055 N DIXIE FREEWAY STE 4
NEW SMYRNA BEACH FL 32168

10. Name and Address of New Registered Agent

81 Name HADLEY, GLENN R.

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

2008 CORNELL PL.

83

84 City

DAYTONA BEACH FL

85

Zip Code

32124

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ~~GL~~ HADLEY, GLENN R.

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

(NOTE: Registered agent signature required when reinstating)

8 FEB '99

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME HADLEY, GLEN R

STREET ADDRESS 2006-77 ST CLAIR AVE E

CITY-ST-ZIP TORONTO ONT CANADA M4T1M5 ON

TITLE SD ☐ DELETE

NAME HWANG, BETTY

STREET ADDRESS 2006-77 ST CLAIR AVE E

CITY-ST-ZIP TORONTO ONT CANADA M4T1M5 ON

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTD ☒ Change ☐ Addition

1.2 NAME HADLEY, GLENN R.

1.3 STREET ADDRESS 2008 CORNELL PLACE

1.4 CITY-ST-ZIP DAYTONA BEACH FL. 32124

2.1 TITLE SD ☒ Change ☐ Addition

2.2 NAME HWANG, BETTY

2.3 STREET ADDRESS ST DEARBORNE AVE

2.4 CITY-ST-ZIP TORONTO ONT. CANADA M4K 1M6

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN R. HADLEY *Glenn R. Hadley* 8 FEB '99 (904) 304-8816

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)