

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000012471

1. Entity Name

HILDRETH ENTERPRISES, INC.

FILED

May 11, 2001 8:00 am
Secretary of State

05-11-2001 90030 015 ***150.00

Principal Place of Business

Mailing Address

19169 PORTOFIND DRIVE
TAMPA FL 33647

19169 PORTOFIND DRIVE
TAMPA FL 33647

2. Principal Place of Business

24552 LAUREL RIDGE DR.

3. Mailing Address

24552 LAUREL RIDGE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LUTZ, FL

City & State

LUTZ, FL

Zip

33549

Country

USA

Zip

33549

Country

USA

4. FEI Number

59-3559101

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

JIMMIE HILDRETH

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

24552 LAUREL RIDGE DRIVE

City

LUTZ

FL

Zip Code

33549

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

Jimmie Hildreth

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

JIMMIE HILDRETH

(NOTE: Registered Agent signature required when reinstating)

4-24-01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete
NAME D
STREET ADDRESS HILDRETH, TERESA
CITY-ST-ZIP 19169 PORTOFIND DRIVE
TAMPA FL 33647

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

TITLE ☐ Delete
NAME D
STREET ADDRESS HILDRETH, JIMMIE
CITY-ST-ZIP 19169 PORTOFIND DRIVE
TAMPA FL 33647

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 24552 LAUREL RIDGE DRIVE
CITY-ST-ZIP LUTZ, FL 33549

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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

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

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 all other like empowered.

SIGNATURE:

Jimmie Hildreth

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JIMMIE HILDRETH 4-24-01

Date

Daytime Phone #

813-341-7705

CR2E034 (10/00)