

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000015104

1. Entity Name

THE HAPPY HOCKER FURNITURE & PAWN, INC.

R

FILED

Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90017 026 ***150.00

Principal Place of Business

~~501 CANAL STREET~~
NEW SMYRNA BEACH FL 32168

Mailing Address

~~501 CANAL STREET~~
NEW SMYRNA BEACH FL 32168

401 CANAL ST.

401 CANAL ST.

2. Principal Place of Business

401 CANAL ST.

Suite, Apt. #, etc.

3. Mailing Address

401 CANAL ST.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

NEW SMYRNA BEACH FL.

City & State

NEW SMYRNA BEACH FL.

4. FEI Number

59-3559387

Applied For

Not Applicable

Zip
32168

Country
USA

Zip
32168

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HODGINS, JOHN L JR.

~~501 CANAL STREET~~ 401 CANAL ST.
NEW SMYRNA BEACH FL 32168

7. Name and Address of New Registered Agent

Name SAME

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

401 CANAL ST.

City NEW SMYRNA BEACH FL Zip Code 32168

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

John L. Hodgins Jr. John L. HODGINS JR. 07/01/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PD
NAME HODGINS, TONI N
STREET ADDRESS 114 AQUA COURT 43 Fore Dr.
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168 ☐ Delete

TITLE STD
NAME HODGINS, JOHN L JR.
STREET ADDRESS 114 AQUA COURT 43 Fore Dr.
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP
NAME John L. HODGINS SR
STREET ADDRESS 3744 Long Grove Ln.
CITY-ST-ZIP PORT ORANGE FL. 32129 ☐ Change ☒ Addition

TITLE OFF
NAME SUSAN HODGINS
STREET ADDRESS 3744 Long Grove Ln.
CITY-ST-ZIP PORT ORANGE FL. 32119 ☐ Change ☒ Addition

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

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

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

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

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:

John L. Hodgins Jr. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 07/01/00 (904) 427-9950

CR2E034 (5/00)

P99000015104

07/01/00 *1000859:

0: FL. Dept of STATE: Division of Corporations

To whom it may Concern.

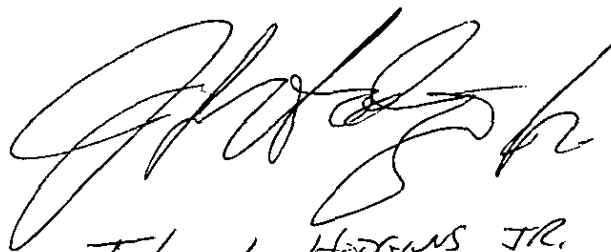
PLEASE BE ADVISED WE CHANGED LOCATIONS
JUNE 1, 1999 AND FURTHERMORE NOTIFIED YOU OF
THIS AT THAT TIME. THIS IS THE FIRST NOTIFICATION
~~I HAVE RECEIVED. THE CORPORATION ADDRESS ALONG WITH~~
ALL OTHER STATE DOCUMENTS REQUIRED HAD ALSO
BEEN CHANGED. ENCLOSED IS THE \$150⁰⁰ FEE. PLEASE
UPDATE YOUR RECORDS. SO THAT THIS MATTER DOES
NOT HAPPEN IN THE FUTURE. THANK YOU FOR YOUR
ASSISTANCE IN THIS MATTER.

Attachment

P99000015104

Mgt.

HARRY HACKER FERT
TRAIN
Inc.



John L. HODGINS JR.

STD.