

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000030567

FILED  
Jan 06, 2004  
Secretary of State

**Entity Name:** HME COMMERCIAL DEVELOPMENT, INC.

**Current Principal Place of Business:**

26650 STATE ROAD 54  
LUTZ, FL 33549

**New Principal Place of Business:**

2355 RADEN DR  
LAND O'LAKES, FL 34639

**Current Mailing Address:**

P.O. BOX 1439  
LAND O LAKES, FL 34639

**New Mailing Address:**

**FEI Number:** 59-3601743

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REIBER, JACOB I  
26650 STATE ROAD 54  
LUTZ, FL 33549 US

**Name and Address of New Registered Agent:**

WINKLER, BERNARD  
P.O. BOX 1441  
LAND O'LAKES, FL 34639 US

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: BERNARD WINKLER

01/06/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WINKLER, LYNN  
Address: 6229 TOWER ROAD  
City-St-Zip: LAND O'LAKES, FL 34639

Title: D ( ) Delete  
Name: WINKLER, BERNARD  
Address: 6229 TOWER ROAD  
City-St-Zip: LAND O'LAKES, FL 34639

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNN WINKLER

D

01/06/2004

Electronic Signature of Signing Officer or Director

Date