## 2003 FOR PROFIT CORPORATION

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)								FILED Apr 11, 2003 8:00 am Secretary of State				
DOCUMENT # P9900080041  i. Entity Name HD LIST.COM, INC.								Secretary of State 04-11-2003 90133 024 ***150.00				
Principal Place of Business 7380 FEATHERSTONE BLVD. SARASOTA FL 34238  2. Principal Place of Business P.O. Box: 772235  Mailing Address 7380 FEATHERSTONE BLVI SARASOTA FL 34238  3. Mailing Address P.O. Box: 772235					2285	5						
Suite, Apt. #, etc. Suite, Apt. #, etc.								☐ CHECK HERE IF MAKING CHANGES				
City & State  City & State  CALA FI. OCALA, FI							4. 1	FEI Number <b>65-0946661</b>		<del></del>	plied For t Applicable	
3447	Cou	ntry C US A	Zip 3447	17	Country USA	·	5.	Certificate of Status Desired		\$8.75 Add Fee Required		
		ddress of Current Re	gistered Ag	ent	NI.	ame	7. ·I	Name and Address of New F	legistered A	gent		
BETTERTON, GREG A ESQ. 981 RIDGEWOOD AVENUE SUITE 101 VENICE FL 34292					St	Street Address (P.O. Box Number is Not Acceptable)  City						
4 After	ILE NOW!!! FEE May 1, 2003 Fee	will be \$550.00		(NOTE: R	legistered Ager	nt signature require	d when re	9. Election Campaign Fi Trust Fund Contribution			O May Be	
•	r Payable to Florid	da Department of S			11.			DITIONS (CHANCES TO CE	ICEBS AND	DIDECTOR	` IN 1 1 1	
IO. TITLE NAME STREET ADDRESS DITY-ST-ZIP	D Delete HODGES, WILLIAM C 7380 FEATHERSTONE BLVD. SARASOTA FL 34238					DRESS 320	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  PRESIDENT  Hodges, Williamc.  \$3200 5.W. 38 PAJE  OCALA FL. 34474					
ITLE IAME STREET ADDRESS : DITY-ST-ZIP				□ Delete	TITLE NAME STREET ADD CITY-ST-ZI	DRESS	•			Change	☐ Addition	
ITLE IAME STREET ADDRESS STY-ST-ZIP	- 1.7¥ <del>©</del>		· • • • • • • • • • • • • • • • • • • •	Delete	NAME STREET ADD	DRE\$S	27-76-9	And the second of the second o			Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADD	l l				☐ Change	Addition	
ITLE IAME TREET ADDRESS		<u>.</u>		Delete Delete	TITLE NAME STREET ADD	DRESS				☐ Change	Addition	

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE

☐ Delete

941-586-8710

☐ Change

☐ Addition