

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097608

FILED
Apr 26, 2004
Secretary of State

Entity Name: HASLDORE ACRES, INC.

Current Principal Place of Business:

3203 W. KNIGHTS AVE.
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

116 GATEPOST LANE
CARY, NC 27516 US

New Mailing Address:

FEI Number: 59-3608235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEW, JOHN C ESQ
150 SECOND AVENUE NORTH SUITE 1500
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

HASLUP, FORREST VP
3203 W. KNIGHTS AVE
TAMPA, FL 33611 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: FORREST HASLUP

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HASLUP, ALLEN L
Address: 116 GATEPOST LANE
City-St-Zip: CARY, NC 27513

Title: VTS () Delete
Name: OLSEN, MARY J
Address: 225 PARIAN RUN
City-St-Zip: DULUTH, GA 30097

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V () Change (X) Addition
Name: HASLUP, FORREST
Address: 3203 W. KNIGHTS AVE
City-St-Zip: TAMPA, FL 33611

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: OLSEN, MARY J.

VTS

04/26/2004

Electronic Signature of Signing Officer or Director

Date