

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 13, 2007 8:00 am**  
**Secretary of State**

02-13-2007 90008 035 \*\*\*150.00

DOCUMENT # P99000109447

1. Entity Name

H202 CORPORATION



Principal Place of Business

1860 NW 19TH STREET  
CRYSTAL RIVER FL 34428

Mailing Address

P.O. BOX 976  
CRYSTAL RIVER FL 34423-0976



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

1860 NW 19th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

CRYSTAL RIVER FL

4. FEI Number 59-3621224

Applied For

Not Applicable

Zip

Country

Zip

34428

Country

US

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

HUBBARD, JEREMIAH A D.O.  
9500 RAYWATER COURT  
CRYSTAL RIVER FL 34429

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME OVERTON, ROBERT  
STREET ADDRESS 1860 NW 19TH STREET  
CITY-STATE-ZIP CRYSTAL RIVER FL 34478 ☐ Delete

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

TITLE D  
NAME OVERTON, THERESA  
STREET ADDRESS 1860 NW 19TH STREET  
CITY-STATE-ZIP CRYSTAL RIVER FL 34428 ☐ Delete

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

TITLE D  
NAME HUBBARD, JEREMIAH A  
STREET ADDRESS 9500 BAYWATER CT  
CITY-STATE-ZIP CRYSTAL RIVER FL 34428 ☐ Delete

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

TITLE ST  
NAME HUBBARD, TANA  
STREET ADDRESS 9500 BAYWATER CT  
CITY-STATE-ZIP CRYSTAL RIVER FL 34429 ☐ Delete

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption contained in Section 119, 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.

SIGNATURE: Robert W. Overton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/07 (352) 795-5901

Date

Daytime Phone #