

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 24, 2003 8:00 am**  
**Secretary of State**

03-24-2003 90237 027 \*\*\*150.00

DOCUMENT # P00000019997

1. Entity Name  
HEARTHSTONE PARTNERS, INC.



Principal Place of Business  
~~5401 W. KENNEDY BLVD., SUITE 751~~  
~~TAMPA FL 33623~~

Mailing Address  
~~P.O. BOX 23887~~  
~~TAMPA FL 33623~~



2. Principal Place of Business  
2325 ULMERTON RD  
Suite, Apt. #, etc.  
SUITE 20

3. Mailing Address  
2325 ULMERTON RD  
Suite, Apt. #, etc.  
SUITE 20

CHECK HERE IF MAKING CHANGES

City & State  
CLEARWATER, FLA

City & State  
CLEARWATER, FLA

4. FEI Number 65-1090460

Applied For  
Not Applicable

Zip Country  
33762 USA

Zip Country  
33762 USA

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

GILES, JOEL B  
200 CENTRAL AVE., SUITE 2300  
ST. PETERSBURG FL 33701

Name GREGORY D. MORRIS  
Street Address (P.O. Box Number is Not Acceptable)  
2325 ULMERTON RD  
STE 20  
City CLEARWATER FL Zip Code 33762

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]*

2/25/03  
DATE

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

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 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 NAME STREET ADDRESS CITY-ST-ZIP	VP MCNEEL, VAN L 2325 ULMERTON ROAD, STE 20 CLEARWATER FL 33762 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MORRIS, GREGORY D 2325 ULMERTON ROAD, STE 20 CLEARWATER FL 33762 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/03  
Date

727-576-6424  
Daytime Phone #

CR2E034 (10/02)