

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 91256 001 ***450.00

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1. Entity Name
HARDIN DEVELOPMENT CORPORATION

Principal Place of Business: **5551 CORPORATE BOULEVARD., 2-A
 BATON ROUGE LA 70808
 US**

Mailing Address: **P.O. BOX 66338
 BATON ROUGE LA 70896-6338**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc.

3. Mailing Address: Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **59-3206680**

Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	REILLY, KEVIN JR	
STREET ADDRESS	5551 CORPORATE BOULEVARD., 2-A	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	VPTD	<input type="checkbox"/> Delete
NAME	ISTRE, KEITH	
STREET ADDRESS	5551 CORPORATE BOULEVARD., 2-A	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	MARCHAND, GERALD	
STREET ADDRESS	5551 CORPORATE BOULEVARD., 2-A	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	S	<input type="checkbox"/> Delete
NAME	MCILWAIN, JAMES	
STREET ADDRESS	5551 CORPORATE BOULEVARD., 2-A	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice-President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sean Reilly	
STREET ADDRESS	5551 Corporate Blvd	
CITY-ST-ZIP	Baton Rouge, LA 70808	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Keith A. Istre **Keith A. Istre** Date: 2-25-2001 Daytime Phone #: 225-926-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)