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FILED  
Jan 21 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 461171 (1)

1. Corporation Name  
SAM H. HERRON, JR., INC.



Principal Place of Business  
SAN SERVANDO AVE  
WARM MINERAL SPRGS FL 34287

Mailing Address  
SAN SERVANDO AVE  
WARM MINERAL SPRGS FL 34287

3. Date Incorporated or Qualified: 09/16/1974  
3a. Date of Last Report: 02/16/1996  
4. FEI Number: 65-0065575  
Applied For:  Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business  
21 Suite, Apt. #, etc  
22 City & State  
23 Zip Country  
24 Zip Country

2a. Mailing Address  
26 Suite, Apt. #, etc  
27 City & State  
28 Zip Country  
29 Zip Country  
30 Zip Country

9. Name and Address of Current Registered Agent  
HERRON, JR. S  
1200 SAN SERVANDO AVE.  
WARM MINERAL SPRINGS FL 34287

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when re-stating) DATE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                      |                                 |
|----------------------------|----------------------|---------------------------------|
| TITLE                      | PD                   | <input type="checkbox"/> DELETE |
| NAME                       | HERRON, SAM H JR     |                                 |
| STREET ADDRESS             | SAN SERVANDO AVE     |                                 |
| CITY - ST - ZIP            | WARM MINERAL SPR FL  |                                 |
| TITLE                      | SD                   | <input type="checkbox"/> DELETE |
| NAME                       | LANIER, HAZEL        |                                 |
| STREET ADDRESS             | 4848 HUNTLEIGH DRIVE |                                 |
| CITY - ST - ZIP            | SARASOTA FL          |                                 |
| TITLE                      |                      | <input type="checkbox"/> DELETE |
| NAME                       |                      |                                 |
| STREET ADDRESS             |                      |                                 |
| CITY - ST - ZIP            |                      |                                 |
| TITLE                      |                      | <input type="checkbox"/> DELETE |
| NAME                       |                      |                                 |
| STREET ADDRESS             |                      |                                 |
| CITY - ST - ZIP            |                      |                                 |
| TITLE                      |                      | <input type="checkbox"/> DELETE |
| NAME                       |                      |                                 |
| STREET ADDRESS             |                      |                                 |
| CITY - ST - ZIP            |                      |                                 |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |   |
|---|--|---|
| 11 TITLE  |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME   |  |   |
| 13 STREET ADDRESS                                     |  |   |
| 14 CITY - ST - ZIP                                    |  |   |
| 21 TITLE  |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME   |  |   |
| 23 STREET ADDRESS                                     |  |   |
| 24 CITY - ST - ZIP                                    |  |   |
| 31 TITLE  |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 32 NAME   |  |   |
| 33 STREET ADDRESS                                     |  |   |
| 34 CITY - ST - ZIP                                    |  |   |
| 41 TITLE  |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 42 NAME   |  |   |
| 43 STREET ADDRESS                                     |  |   |
| 44 CITY - ST - ZIP                                    |  |   |
| 51 TITLE  |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 52 NAME   |  |   |
| 53 STREET ADDRESS                                     |  |   |
| 54 CITY - ST - ZIP                                    |  |   |
| 61 TITLE  |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 62 NAME   |  |   |
| 63 STREET ADDRESS                                     |  |   |
| 64 CITY - ST - ZIP                                    |  |   |

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sam H Herron Jr DATE: 1-10-97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE: 1-10-97 941-426-9581

CR2E034 (9/96)