


FILE NOW: FILING FEE IS \$61.25

FILED

**Mar 02 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 748284 (7)
1. Corporation Name
HEART OF THE CITY FOUNDATION, INC.



Principal Place of Business 106 E CHURCH STREET ORLANDO FL 32801	Mailing Address 106 E CHURCH STREET ORLANDO FL 32801
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country

3. Date Incorporated or Qualified 07/31/1979
4. FEI Number 59-1940285
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
**MCKENNEY, BEN L.
106 EAST CHURCH ST
ORLANDO FL 32801**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T NAME STREET ADDRESS CITY-ST-ZIP	1.1 TITLE	T CORRILL, CHRIS 110 E. HILLCREST ST. ORLANDO, FL. 32801
	<input type="checkbox"/> DELETE	1.2 NAME	
	<input checked="" type="checkbox"/> DELETE	1.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	1.4 CITY-ST-ZIP	
TITLE	T NAME STREET ADDRESS CITY-ST-ZIP	2.1 TITLE	T NEEDHAM, DANIEL 5343 JACO CIRCLE ORLANDO, FL. 32812
	<input checked="" type="checkbox"/> DELETE	2.2 NAME	
	<input type="checkbox"/> DELETE	2.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP	
TITLE	T NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE	T MCLEOD, DAVID 930 N. TEXAS AVE. ORLANDO, FL. 32804
	<input type="checkbox"/> DELETE	3.2 NAME	
	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	
TITLE	T NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE	T BRANNON, CAROL 1109 ARUBA DR ORLANDO, FL. 32802
	<input type="checkbox"/> DELETE	4.2 NAME	
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP	
TITLE	T NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE	T CLAYTON, CRAIG 3200 LAKE SHORE DR. ORLANDO, FL. 32813
	<input type="checkbox"/> DELETE	5.2 NAME	
	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
TITLE	TS NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE	
	<input type="checkbox"/> DELETE	6.2 NAME	
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TITLE	TS NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE	
	<input type="checkbox"/> DELETE	6.2 NAME	
	<input type="checkbox"/> DELETE	6.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	6.4 CITY-ST-ZIP	

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* x 2-12-98

CR2E037 (10/97)