

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **H67647** (8)

1. Corporation Name
JERRY HEARD ENTERPRISES, INC.



Principal Place of Business: **10181 SIX MILE CYPRESS P.O. BOX 1666 FORT MYERS FL 33902**
Mailing Address: **10181 SIX MILE CYPRESS P.O. BOX 1666 FORT MYERS FL 33902**

3. Date Incorporated or Qualified: **07/23/1985**
3a. Date of Last Report: **01/17/1995**
4. FEI Number: **59-2550471**
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 (21-24) and 2a. Mailing Address (25-30) fields with sub-sections for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PALEN, HOWARD
10181 SIX MILE CYPRESS PKWY
FORT MYERS FL 33912**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 607.0506, Florida Statutes.

SIGNATURE

Signature (typed or printed name) of registered agent or officer or director

Name (typed or printed name) of officer or director

FEI

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with columns for Title, Name, Street Address, City-St-Zip, and a checkbox for DELETE.

Table with columns for Title, Name, Street Address, City-St-Zip, and checkboxes for Change and Addition.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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, in connection therewith with an address.

SIGNATURE: *Michael D Beck* **MICHAEL D. BECK** **3/18/96** **941-278-4455**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)