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CORPORATION ANNUAL REPORT 1995

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:13

DOCUMENT # 340484 (5)

1. Corporation Name
HEIDT & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
2212 SWANN AVE TAMPA FL 33606	2212 SWANN AVE TAMPA FL 33606

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/22/1969
3a. Date of Last Report: 02/15/1994
4. FEI Number: 59-1226124 ☐ 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 (24): Country (25):

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

9. Name and Address of Current Registered Agent

HEIDT, BOB L
14 SANDPIPER ROAD
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name: WILLIAM P BAHLKE
82 Street Address (P.O. Box Number is Not Acceptable): 825 S OREGON AV
83:
84 City: TAMPA FL 85 Zip Code: 33606

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: [signature] William P. Bahlke, President — February 10, 1995
Signature of new registered agent (NOTE: Registered Agent signature required when necessary) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D ☒ Change ☐ Addition
NAME	HEIDT,BOB L (COB)	1.2 NAME	DILLION, ROBERT L.
STREET ADDRESS	14 SANDPIPER RD	1.3 STREET ADDRESS	2704 CHAMBRAY LN.
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	TAMPA FL 33611
TITLE	CEO	2.1 TITLE	☐ Change ☐ Addition
NAME	ANDREWS, EDWARD A	2.2 NAME	
STREET ADDRESS	118 ASHBROOK DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	☐ Change ☐ Addition
NAME	HENRY, E. T.	3.2 NAME	
STREET ADDRESS	1013 GUISANDO DE AVILA	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	☐ Change ☐ Addition
NAME	LUCAS, JAMES B.	4.2 NAME	
STREET ADDRESS	7022 OAKVIEW CIR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	☐ Change ☐ Addition
NAME	ROUTT, JOAN J. (ASS'T)	5.2 NAME	
STREET ADDRESS	17123 MOCKINGBIRD LN	5.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL	5.4 CITY-ST-ZIP	
TITLE	P	6.1 TITLE	☒ Change ☐ Addition
NAME	BAHLKE, WILLIAM P.	6.2 NAME	
STREET ADDRESS	~~109 BERMUDA AVE.~~	6.3 STREET ADDRESS	825 S OREGON AV
CITY-ST-ZIP	TAMPA FL	6.4 CITY-ST-ZIP	

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)(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: [signature] — February 10, 1995 — (813) 253-5311
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Robert L. Dillion — Date — Daytime Phone #

0202106 CP