NAME

STREET ADDRESS

CITY-ST-ZIP

FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (8)234095 HERON HOLDINGS, INC. Principal Place of Business Mailing Address 2965 EXECUTIVE DRIVE 2005 EXECUTIVE DRIVE C/O JACQUELYN COPERWHEAT CLEARWATER FL 34622 C/O JACQUELYN COPPERWHEAT DO NOT WRITE IN THIS SPACE CLEARWATER FL 34822 Date Incorporated or Qualified 03/07/1960 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-0897576 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No 33762 33762 30 25 29 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RICE, MARTIN ERROL **696 FIRST AVE N STE 400** Street Address (P.O. Box Number is Not Acceptable) 333 Thied Ave. N. ST PETERSBURG 33701 Ste 325 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 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 am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable egistered Agent signature required when reiristating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE ☐ Change ☐ Addition COPPERWHEAT, JACQUELYN M NAME 1.2 NAME 2865 EXECUTIVE DRIVE STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL** 1.4 CITY - ST - ZIP CITY-ST-7IP DELETE Change ☐ Addition TITLE 2.1 TITLE RISSER, PN III NAME 2.2 NAME 2865 EXECUTIVE DRIVE STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME MITCHELL, BRUCE 3.2 NAME 2865 EXECUTIVE DRIVE STREET ADDRESS 3.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 3.4 CITY-ST-ZIP Addition TITLE DELETE Change 4.1 TITLE KATCHUK, KERRY 4. 2 NAME NAME 2865 EXECUTIVE DRIVE 43 STREET ADDRESS STREET ADDRESS **CLEARWATER FL** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition TITLE 5.1 TITLE CURRAN, JOHN NAME 5.2 NAME HARRISON, Sharon 2865 EXECUTIVE DRIVE STREET ADDRESS 5.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change ■ Addition TITLE 6.1 TITLE

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: __ Sa.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP