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FILED
Apr 24 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 # 291333 (3)
1. Corporation Name
HERRON STEEL CO., INC.

Principal Place of Business Mailing Address
RT 10 BOX 408 RT 10 BOX 408
TALLAHASSEE FL 32310-9062 TALLAHASSEE FL 32310-9062



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		03/29/1965		06/17/1996	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		59-1093213		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
26		31		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	

9. Name and Address of Current Registered Agent

HERRON, WILLIAM H. SR.
1008 HAYES
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CD	DELETE		1.1 TITLE	Change		Addition
NAME	HERRON, WILLIAM H. SR.			1.2 NAME			
STREET ADDRESS	1008 HAYES ST.			1.3 STREET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL			1.4 CITY-ST-ZIP			
TITLE	PTD	DELETE		2.1 TITLE	Change		Addition
NAME	HERRON, WILLIAM H. JR.			2.2 NAME			
STREET ADDRESS	95 MAPLEWOOD DRIVE			2.3 STREET ADDRESS			
CITY-ST-ZIP	CRAWFORDVILLE FL			2.4 CITY-ST-ZIP			
TITLE	VSD	DELETE		3.1 TITLE	Change		Addition
NAME	HERRON, RUSSELL A.			3.2 NAME			
STREET ADDRESS	544 HICKORYWOOD DRIVE			3.3 STREET ADDRESS			
CITY-ST-ZIP	CRAWFORDVILLE FL			3.4 CITY-ST-ZIP			
TITLE	D	DELETE		4.1 TITLE	Change		Addition
NAME	HERRON, MARY A.			4.2 NAME			
STREET ADDRESS	1008 HAYES ST.			4.3 STREET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL			4.4 CITY-ST-ZIP			
TITLE		DELETE		5.1 TITLE	Change		Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		DELETE		6.1 TITLE	Change		Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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: *[Signature]* 4-24-97 Pres.

CR2E034 (9/96)