## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 380572

(8)

HENIGAR & RAY, INC.

FILED	)
Apr 07 1997	8:00am
Secretary o	f State

 	 4.511 A1011 1251

Principal Plac	cipal Place of Business Mailing Address		T TO STORE THE TOTAL COURT COINT HOUR CHAIN COURT COUR							
640 E. HIGHW			RNARDO COL	JRT						
CRYSTAL RIVE	R FL 32629	SUITE 200 SAN DIEGO	CA 92127-16	22						
		US	VI. VE. 2.				3. Date Incorporated or Qualified	3a. Da	te of Last F	Report
							04/16/1971	04/1	9/1996	
	Place of Business	2a. Maiting	Address				4. FEI Number			pplied For
21		26		- ,			59-1325510			lot Applicable
Suite, Apt	#. etc	<u> </u>	pt. #, etc.				5. Certificate of Status Desired			Additional lequired
City & Stat	<i>(</i> !	27   City & S	State				6. Election Campaign Financing			May Be
23	•	28					Trust Fund Contribution			to Fees
Zip	Country	Zip		Cou	intry		8. This corporation has liability for	r intangible		
24	25	29		30			Florida Statutes		] No	
	9. Name and Address of Cur	rent Registered Ag	jent		L.,		10. Name and Address of New F	Registered A	lgent .	
CZA	RNECKI, EDWARD L				61	NameRohi	ert L. Henigar			
640	E. HIGHWAY 44				62	Street Addre	ess (P.O. Box Number is Not Accept	able)		
CRY	STAL RIVER FL 32629				Ц	640	ess (P.O. Box Number is Not Accept East Highway 44			
					В3					
					84	City			85 Zp	Code
1				<u> </u>		Crys	stal River	FL		Code 29-4399
11. Pursuant	to the previsions of Sections 607.0	0502 and 607, 1508	riorida Statu	tes, the a	bove	named corporation	oration submits this statement for the	purpose of	changing	its registered
agent. La	am familiar with, and accept the ob	ligations of Section	607.0805, F	lorida Sta	tutes		oration submits this statement for the on's board of directors. I hereby acc	opt the app	on to long of	, rogisterou
SIGNATURE	X / My		<b>%/</b>					3/21		
	Signature, types or printed name of registrout		) (NO		d Age	nt signature require	od when reinstating)			DO 01 40
12.	· · · · · · · · · · · · · · · · · · ·	AND DIRECTORS	DELETE	13.	T) F		ADDITIONS/CHANGES TO OFF	ICERS AND	☐ Change	
TITLE	PD DODEDT	7	DECETE	1,170					□ rusuñe	L. Modition
NAME	HENIGAR, ROBERT			1,2 N						
STREET ADDRESS	10500 N. SURREY PT.			1		ADORESS				
Dity-ST-ZIP Title	CRYSTAL RIVER FL		DELETE	1.4 C 2.1 To	ITY-S	1-ZIP	· · · · · · · · · · · · · · · · · · ·	. ,	Change	Addition
NAME	BERRYMAN, RAY J.		Diecie	2.2 N					v.m.iga	
STREET ADDRESS	11590 W BERNARDO COUR	PT #200				ADDRESS				
	SAN DIEGO CA	11 7200				į į				
CITY+S1+ZIP TITLE	TD		DELETE	3.1 T	ITY-S	11-ZIP			Change	Addition
NAME	RODRIGUEZ, JON A.	•		3.2 N						
STREET ADDRESS	11590 W BERNARDO COUR	RT #200				ADDRESS				
CITY-ST-ZIP	SAN DIEGO CA	11 #200			CITY - S					
TITLE	S		DELETE	4.1 T		11-42-4		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME.	BERRYMAN, MARY J.			4.21		1			_ •	
STREET ADORESS	16880 W BERNARDO DR					ADDRESS				
CHY-SI-ZIF	SAN DIEGO CA	_			ITY-\$					
HILE	AS		DELETE	5.1 T				·	☐ Change	☐ Addition
NAME	CZARNECKI, EDWARD			5.2 N	AME					
STREET ADDRESS	4527 N. LADYBUG DR.	,				ADDRESS				
CITY-ST-ZIF	CRYSTAL RIVER FL				ITY-S	1				
TITLE			DELETE	6.1 T			######################################		☐ Change	Addition
NAM <del>{</del>				62 N	IAME					
STREET ADDRESS						ADDRESS				
CITY-S1-7IP					HTY-S					
14 Ldo boro	by cortify that the reference core	ntiod with this filing	door not gue				in Section 119 07/3\(i) Florida State	itee I further	cortify the	t the

4. To nereby 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 43 if changed, or on an attachment with an address.

SIGNATURE

CHATCHE AND TYPES OR SHANTED NAME OF SIGNING OFFICER OR DIRECTOR

J-Berrymon

2/3/47 (6/4/ 4/5/-6/0

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