SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

STREET ADDRESS

CITY-ST-ZIP

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Jul 21 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 **DIVISION OF CORPORATIONS** DOCUMENT #

1. Corporation Name 472101 (5) HARTHILL, INC. Principal Place of Business Mailing Address 1701 S. PEAR ST. 1701 S. PEAR ST. P O BOX 368 P O BOX 368 DO NOT WRITE IN THIS SPACE **BLOUNTSTOWN FL 32424 BLOUNTSTOWN FL 32424** 3. Date Incorporated or Qualified 3a, Date of Last Report 03/19/1975 .02/20/,1996 2. Principal Place of Business 2a, Mailing Address Applied For 21 26 59-1665223 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LEONARD, B.H. 1701 SO PEAR STR 82 Street Address (P.O. Box Number is Not Acceptable) **BLOUNTSTOWN FL 32424** 83 84 City 85 Zip Code 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE LEONARD, JOSEPH H. NAME 1.2 NAME 1600 S PEAR ST STREET ADDRESS 1.3 STREET ADDRESS **BLOUNTSTOWN FL** 1.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE LEONARD, B.H. NAME 2.2 NAME 1708 PEAR ST. STREET ADDRESS 2.3 STREET ADDRESS **BLOUNTSTOWN FL** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE LEONARD, MICHAEL W. NAME 3.2 NAME HWY 275 SOUTH STREET ADDRESS 3.3 STREET ADDRESS **BLOUNTSTOWN FL** CITY-ST-ZIP 3.4. CITY - \$1 - 7IP DELETE Change TITLE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME

6.3 STREET ADDRESS

6.4 CITY - S1 - 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 eath; 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 amultachment with an address.

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