

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

FILED

Feb 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
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DOCUMENT # **516446** (2)
1. Corporation Name
ERA SERVICES, INC.



Principal Place of Business 8761 PERIMETER PARK BLVD SUITE 105 JACKSONVILLE FL 32216 US	Mailing Address 8761 PERIMETER PARK BLVD SUITE 105 JACKSONVILLE FL 32216-8397 US
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3. Date Incorporated or Qualified 10/14/1976	3a. Date of Last Report 01/26/1996
4. FEI Number 59-1783755	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	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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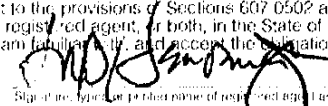
9. Name and Address of Current Registered Agent

**RIBER, JEFFREY, K
8761 PERIMETER PARK BLVD.
SUITE
JACKSONVILLE FL 32216**

10. Name and Address of New Registered Agent

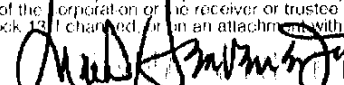
81 Name Mac D. Heavener, Jr.
82 Street Address (P.O. Box Number is Not Acceptable) 8761 Perimeter Park Blvd.
83 Suite Suite 105
84 City Jacksonville
85 Zip Code FL 32216

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  **MAC D. Heavener, Jr. (President)** 2/19/97
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE V	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME JONES, DANA E		1.2 NAME	
STREET ADDRESS 5007 RIVER PT RD		1.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE, FL 00000		1.4 CITY-ST-ZIP	
TITLE D	☐ DELETE	2.1 TITLE P/D	☒ Change ☐ Addition
NAME HEAVENER, MAC D		2.2 NAME Mac D. Heavener, Jr.	
STREET ADDRESS 5446 RIVER TRAIL RD N		2.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE, FL 00000		2.4 CITY-ST-ZIP	
TITLE S	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME HEAVENER, ANN		3.2 NAME	
STREET ADDRESS 5446 RIVER TRAIL RD N		3.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL		3.4 CITY-ST-ZIP	
TITLE TP	☒ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME RIBER, JEFFREY K		4.2 NAME	
STREET ADDRESS 3145 SECRET WOODS TRAIL W.		4.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE, FL 00000		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. I changed or in an attachment with an address.

SIGNATURE:  **Mac D. Heavener, Jr.** 2/4/97 904-646-4900
DATE Daytime Phone #

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0035223

CR2E034 (9/96)