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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 626784

(3)

DAVID B. HEITEL, INC.

**FILED** 

May 05 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address						,	-{	
	MANATEE AVE W DENTON FL \$4209		7322 MANATEE AVE W BRADENTON FL 34209 US					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
								06/20/1979
2. Pr	incipal Place of Bu	siness	2a. Mailing Address					4. FEI Number Applied For
21			26					<b>59-1918831</b> Not Applicab
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional
22			27					Fee Required
_	ty & State		City & S	State				6. Election Campaign Financing \$5.00 May Be
23 Zig	<u> </u>	Country	<b>28</b>		Cour	itru		Trust Fund Contribution
24	•	25	29		30	u y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Nam	ne and Address of Curren		jent	1001			10. Name and Address of New Registered Agent
	HEITEL, DAV	/ID B				B1	Name	
7322 MANATEE AVENUE W						B2	Stroot Addro	ess (P.O. Box Number is Not Acceptable)
BRADENTON FL 33529							Sireet Addre	ass (r.o. box number is not Acceptable)
					Ī	<b>B</b> 3		
					ļ.	84	City	85 Zip Code
	transact to the man	ining of Ocalieus 007 050	1007.4500	Charles Oral			<del> </del>	FL 63 2p code
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 agont, 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 tille if applicable (NOTE: Registered Agent signature required when reinstating)  DATE								
12.	argniture, typ	OFFICERS AND		(NO	13.	Ager	nt signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	OF FIOLITO PARE		DELETE	1,1 TITL	E		Change Addition
NAME	–	L, DAVID B	·		1.2 NAN			
STREET		MANATEE AVE W			1.3 STR	EET /	ADDRESS	
CITY-ST		NTON, FL 00000			1.4 CITY			
TITLE	V			DELETE	2.1 TITL	E		Change Addition
NAME		R-HEITEL, SUSAN L			2 2 NAN	AE.		
STREET		MANATEE AVE W			2.3 STA	EET A	address	ere.
CITY-S1	r-zip <b>BRAD</b> E	NTON, FL 00000		<b></b>	2. 4 DIT	_	T - ZIP	
TITLE			ι	DELETE	3.1 TITL	-		Change Addition
NAME	******				3.2 NAN			
	ADDRESS						ADDRESS	
CITY-SI	1-211			DELETE	3.4. CIT 4.1 TiTL		1- ZIP	☐ Change ☐ Additio
NAME			•		4.1 NA			Change C Addition
	ADDRESS						ADDRESS	
CITY-ST					4.4 CITY			
TITLE				DELETE	5.1 TITL			Change Additio
NAME					5.2 NAM	IE		
STREET	ADORESS				5.3 STRI	EET A	ADDRESS .	
CITY-ST	- ZIP				5.4 CITY	-st	- ZIP	
TITLE				DELETE	6.1 TITL	E		Change Additio
NAME					6.2 NAM	IE.		
	ADDRESS				6.3 STRI	EET A	ADDRESS	
CITY-ST		he information supplied with	h thin filing door	not on the	6.4 CITY			Capitan 440 07/0V/N Flactor Continue 15 00 100 100 100 100 100 100 100 100 1
in of	dicated on this and ficer or director of	iual report or supplemental	สากใหล่! report is ver of t <u>rusto</u> e ep	tron anglac npowered to	curate <b>a</b> nd	1hai	t my signature	Section 119.07(3)(i), Florida Statutes. I further certify that the information e shall have the same legal effect as if made under oath; that I am an irred by Chapter 607, Florida Statutes; and that my name appears in