Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90039 046 ***150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 640619

1. Corporation Name

HEADWAY MANAGEMENT COMPANY

Principal Place of Business Mailing Address .	
	iti didil didil dibli iddi
1200 W RETTA ESPLANADE 1200 W RETTA ESPLANDE	
#58 #58	~=
PUNIA GUNDA FE 33950	
US 3. Date incorporated or Qualified 08/27/1979	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 93-0754910	Not Applicable
Suite Ant # etc Suite Ant # etc\$8	3.75 Additional
22 27 5. Certificate of Status Desired	Fee Required
	5.00 May Be
28 Trust Fund Contribution A	Added to Fees
Zip Country Zip Country 8. This corporation owes the current year Intangible	
24 25 29 30 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name	
WOTITZKY, EDWARD L	
223 TAYLOR ST 82 Street Address (P.O. Box Number is Not Acceptable)	}
PUNTA GORDA FL 33950	
DAI City	T 75- Codo
84 City FL 85	Zip Code
11. Durwant to the provisions of Sections 607 0503 and 607 1508. Elorida Statutes, the above named corporation submits this statement for the purpose of change	ging its registered
	it as 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	•
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board or directors. Thereby accept the appointment agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board or directors. Thereby accept the appointment agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment 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	RECTORS IN 12
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applicitudes 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 TILLE VP	RECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applicitudes 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 TILLE VP	RECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applicitudes 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 TILLE VP	RECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the application 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. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS IN TITLE NAME BURRIS, DAVID STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL OFFICERS AND ENTRY IN TITLE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP Aventura, Florida 33.180	RECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the application 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 AND DIRECTORS IN THE PROPERTY OF IT	RECTORS IN 12 Change
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applications of 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.	RECTORS IN 12 Change
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applications of 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.	RECTORS IN 12 Change
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applications of 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.	RECTORS IN 12 Change
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applications of 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	RECTORS IN 12 Change Addition / © 3 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applications of 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	RECTORS IN 12 Change Addition / © 3 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the agent and such change was authorized by the corporation's board of directors. Thereby accept the application agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod 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	RECTORS IN 12 Change Addition / © 3 Change Addition
office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment 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. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN THE PROPERTY OF THE PR	RECTORS IN 12 Change Addition / © 3 Change Addition
office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIgnature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS TITLE NAME BURRIS, DAVID STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL TITLE PD NORRIS, ALAN STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL TITLE AS NORRIS, ALAN STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL TITLE AS NOME WILHITE, BARRY A STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL TITLE AS NAME WILHITE, BARRY A STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL TORIGINATION SCRUPT STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL TITLE AS NAME STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL TORIGINATION STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS AS ACITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS AS ACITY-ST-ZIP	RECTORS IN 12 Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment 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 algorature required when retiristating) DATE	RECTORS IN 12 Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment 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	RECTORS IN 12 Change Addition To 3 Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's pooled of directors. Thereby accept the appointment agent and the properties of the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE	RECTORS IN 12 Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. Thereby accept the applications agent. Jam 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 DELETE 11.1TITLE NAME BURRIS, DAVID 1200 W RETTA ESPLANADE #58 CITY-ST-ZIP PUNTA GORDA FL TITLE PD DELETE 1.1TITLE DELETE 2.1TITLE AS NORRIS, ALAN 2.2 NAME STREET ADDRESS 1.200 W RETTA ESPLANADE #58 TITLE AS PUNTA GORDA FL TITLE AS PUNTA GORDA FL DELETE 3.1TITLE NAME WILHITE, BARRY A STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL DELETE 3.1TITLE DVP DELETE 3.1TITLE AS STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL DELETE 3.1TITLE DVP DELETE 3.1TITLE DVP DELETE 3.1TITLE DVP DELETE 4.1TITLE DVP DELETE AS ADDITIONS/CHANGES TO OFFICERS AND DIF 1.1TITLE DVP ADDITIONS/CHANGES TO OFFICERS AND DIF 1.1TITLE DVP ADDITIONS/CHANGES TO OFFICERS AND DIF 2.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL DELETE 4.1TITLE DVP ANAME AS STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL DELETE 5.1TITLE DC GROENENBOOM, HERB	RECTORS IN 12 Change Addition To 3 Change Addition Change Addition
office or registered agent, or both, in the State of Flonda. Such change was authorized by the Corporation's board of directors. Thereby accept the applications agent. Jam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE	RECTORS IN 12 Change Addition To 3 Change Addition Change Addition
office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. Thereby accept the application agent. Jum familiar with, and accept the obligations of, Section 607.0505, Flonda Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE VP NAME BURRIS, DAVID 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.TITLE STREET ADDRESS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.TITLE VP NAME BURRIS, DAVID 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS ADDITIONS 14.CMY-ST-ZIP ALTITLE 12. ADDITIONS/CHANGES TO OFFICERS ADDITI	RECTORS IN 12 Change Addition Thange Addition Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment agent. I am familiar with, and accept the obligations of, Section 607.0505, Flonda Statutes. SIGNATURE SIGNATURE 12.	RECTORS IN 12 Change Addition To 3 Change Addition Change Addition

CITY-ST-ZIP 14. I 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 apacityment with an address, with all other like appowered.

6.4 CITY-ST-ZIP

SIGNATURE:

3/15/99

1435-0255