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

PROFIT CORPORATION ANNUAL REPORT 1997

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FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

HERITAC	BE REALTY OF LAKE COUN	NTY, INC.	ı		
Principal Place	of Business	Mailing Address			T CORES BASED TOTAL CORES TAGON TAGOS BASE OF OUR STOLE BEING BEING BODDY BEING
17521 US HAYY 441 MOUNT DORA FL \$2757		17521 US HWY 441 MOUNT DORA FL 32757-6737			
					3. Date Incorporated or Qualified 3a. Date of Last Report 08/03/1981 04/16/1996
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-2112302 Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State	3	City & State	, ,		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Country	Zip	Cour	itry	This corporation has liability for intangible tax under s. 199.032,
24	25	29	30		Florida Statutes
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
BAKER, WILLIAM F., JR.				81 Name	
2051 MORNINGSIDE DIRVE			·	B2 Street Ac	ddress (P.O. Box Number is Not Acceptable)
	INT DORA FL 32757		. [
	-			B3	
•			ļ	84 City	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	2 and 607, 1508. Florida Statut	es, the ab	ove-named o	
office or re	egistered agent, or both, in the State	of Florida, Such change was	authorizec	by the corpo	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
	in lamiliar with, and accept the obliga	mons of, Section 607.0005, Fig	JIIda Statt	nes.	
SIGNATURE	Signature, lyped or printed name of registered ager	nt and title if applicable. (NOT	E Registored	Agent signature re	equired when reinstaling) DATE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D\$T	DELETE	1.1 10	LE	Change Addition
NAME :	BAKER, WILLIAM F, JR		1.2 NA	ME	
STREET ADDRESS	2051 MORNINGSIDE DR		1.3 \$11	REET ADDRESS	
CITY-ST-ZIP	MOUNT DORA, FL 00000		1.4 (01)	Y-ST-ZIP	
TITLE	D _{EW}	☐ DELETE	2.1 111	LE	☐ Change ☐ Addition
NAME	HÕĽDEN, JUDITH A.		2.2 NA	ME	
STREET ADDRESS	1880 PINEWAY COURT		2.3 510	REE1 ADDRESS	
CITY-ST-ZIP	MOUNT DORA, FL 00000	L DELETE		IY-ST-ZIP	
TITLE	D AND AND A	DELETE	3.1 717	\	☐ Change ☐ Addition
NAME	BAKER, JANIE M.		3.2 NA		
STREET ADDRESS	2051 MORNINGSIDE DRIVE			REET ADDRESS	
CITY-ST-ZIP	MOUNT DORA, FL 00000	DELETE	34, CI 4.1 TII	IY-SI-ZIP	☐ Change ☐ Addition
TITLE	DP HOLDEN, WALTER M.	L. MILLE	4.1 jili 4.2 N/	\ \	Change C. Moutton
7	1880 PINEWAY COURT			REET ADDRESS	
STREET ADORESS City-St-Zip	MOUNT DORA, FL 00000			Y-ST-ZIP	
TITLE	MODITI DONG PL 00000	DELETE	5.1 717		Change Addition
NAME			5.2 NA		- Constant - Constant
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE \$ 47.5		DELETE	6.1 111		Change Addition
NAME			6.2 NA		
STREET ADDRESS				REE1 ADDRESS	
CITY-ST-ZIP			6.4 CIT	Y-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 Statutos. 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 attendment with an address.