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 #

(8)

FILED Mar 25 1998 8:00am Secretary of State

HEISE	REALTY, INC.									
Principal Plac	e of Business	Mailing Addr	ess				ı tambinin bele tahbın amely ümely mayer am	IF OTOTA DIDE	OJEN DIDIL ON	
39 OLD KINGS ROAD N., STE. #4 39 OLD KINGS ROAD N., S										
PALM COAST FL 32137 PALM COAST FL 32137							DO NOT WRITE	IN THIS S	SPACE	
						ŀ	3. Date Incorporated or Qualified			
						l	05/05/1982			
2 Principal P	lace of Business	2a, Mailing A	ddress				4. FEI Number	****	Ar	plied For
21		26					59-2202205		No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.									\$8.75	Additional
22 27							5. Certificate of Status Desired	<u></u>	Fee Re	equired
City & State	е	City & Sta	ite				6. Election Campaign Financing	_	\$5.00	• •
23		28					Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	h h				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No				
24	25	29	30				Personal Property Tax due June 10. Name and Address of New Re	30. L	_	7 NO
	g, Name and Address of Cur	rrent Hegistered Agei	nt	81	Name		10. Name and Address of New He	distalen y	- Genr	
	ISER, GARY				Name					
39 OLD KINGS ROAD N., STE. #4 PALM COAST FL 32137				82	Street A	Addres	ess (P.O. Box Number is Not Acceptable)			
17	EM CONOT IE DETO!			83					· · · · · - · · ·	
				84	City			FL	85 Zip	Code
		0500 J.007.4500 F					ation as harden this atotomout for the s		shanaina it	o registered
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, typod or printed name of registered		(NOTE: Re	<u> </u>	nt signature i	required (when reinstating)	DATE	DIDECTOR	0.144.60
12.	PT	AND DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFICE			XXXddition
TITLE	HEISER, GARY G	L	DECE			D	-		CT Outside	AAA AGOOG
NAME	39 OLD KINGS RD.N.			1.2 NAME	4000000		ISER, THOMAS J			i
STREET ADDRESS	PALM COAST, FL:32937	22127		1.3 STREET	- 1		FAITH LANE	2.77		
CITY - ST - ZIP	VS		DELETE	1.4 CITY - S 2.1 TITLE	T-ZIP	PA	LM COAST, FL 321	3 /	Change	Addition
TITLE	HEISER, FRANCES N.	L	DECETE						Onlings	
NAME	39 OLD KINGS RD.N.			2.2 NAME						
STREET ADDRESS	PALM COAST FL 321	27		2.3 STREET						
CITY-ST-ZIP	FALM COASITE 321		DELETE	2. 4 CITY - S 3.1 TITLE	51 - ZIP				Change	Addition
TITLE		_	PLLETE	3.2 NAME						
NAME				3.3 STREET	ADDDECC					
STREET ADDRESS					1					
CITY-ST-ZIP TITLE		Г	DELETE	3.4. CITY - S 4.1 TITLE	11-2IF				Change	Addition
		_	,	4. 2 NAME]					
NAME				4.3 STREET	ADDRESS					
STREET ADDRESS			Į.		1					
CITY-ST-ZIP			DELETE	4.4 CITY - S 5.1 TITLE	1-217				Change	Addition
TITLE		L	, SEELIN	5.2 NAME	i					
NAME PROFES ADDRESS				5.3 STREET	ADDRESS					
STREET ADDRESS				5.3 STREET						
CITY-ST-ZIP TITLE		Γ	DELETE	6.1 TITLE					Change	Addition
NAME				6.2 NAME					-	
STREET ADDRESS				6.3 STREET	ADDRESS					
***************************************				6.4 CITY-S						
CITY-ST-ZIP	l <u> </u>			0.4 0111-5	1-20					

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 an an attachment with an address.

904-445-5881