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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # **F85433** (3)PRINTING BY HEARN, INC. Principal Place of Business Mailing Address % WILLIAM H HEARN % WILLIAM H HEARN 5051 TOZOUR ROAD 5051 TOZOUR ROAD FT PIERCE FL 34946 FT PIERCE FL 34948-7307 3. Date Incorporated or Qualified 3a. Date of Last Report 06/15/1982 02/12/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2217046 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zφ Country Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes Yes No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HEARN, WILLIAM H 81 5051 TOZOUR ROAD 82 Street Address (P.O. Box Number is Not Acceptable) FT PIERCE FL 34946 83 City Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607,0505. Florida Statutes. SIGNATURE Signature, typical or pair lest name of regedered agent and title of applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. (96/6) VD. **C**hange DELETE Addition 1.1 TITLE 140 HEARN, DEBORAH D CR2E034 1.2 NAME MALIF 5051 TOZOUR ROAD 1.3 STREET ADDRESS STREET ADJRESS FT PIERCE, FL 00000 1.4 CITY - ST ZIP City-St-ZiF DELETE Addition 2.1 TITLE TITLE HEARN, WILLIAM H 2.2 NAME NAME 5051 TOZOUR ROAD 2.3 STREET ADDRESS STREET ADORESS 34946 FT PIERCE, FL 00000 CITY-ST ZIP 2. 4 CITY - ST ZIP STD DELETE Addition 3.1 TITLE TITLE HEARN, JEANNE 3.2 NAME N5Mb 5051 TOZOUR ROAD 3.3 STREET ADDRESS STHEET ADDRESS FT PIERCE, FL 00000 3.4. CITY-ST ZIP Cith - ST ZiP \_\_ Addition VD DELETE 4.1 TITLE TITLE HEARN, EDWARD J 4. 2 NAME NAME 5051 TOZOUR ROAD STREET ADDRESS 4.3 STREET ADDRESS

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 3 if changed, or on an attachment with an address

6.4 City - St - ZIP

4.4 CITY-ST ZIP

5.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

5.4 CITY-S

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

C 11 - 51 - 25P

STREET ADDRESS

STREET 4004655

C4Y+S1-7IP

TITLE

NAM:

THE

MAVE

FT PIERCE, FL 00000

5051 TOZOUR ROAD

FT PIERCE, FL 00000

HEARN, THOMAS HENRY

VD

GNING OFFICER OR DIRECTOR

DELETE

DELETE

2/18/97 (56)461-1526

Addition

Addition

Change

**FILED** 

Feb 25 1997 8:00am