EILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS						
DOCUMENT # F9400 1. Corporation Name AMERICAN HERITAGE HOLDING	0005980 (7 CORPORATION	')			i naknas kira ibiri bibli daliki daliki da	ni 43 nn 58 10	n 8612: 8416 1810 (841 1811 1811
Principal Place of Business	Mailing Address		, <u>-</u>				
108 PARK PLACE BOULEVARD KISSIMMEE FL 34741	200 S. ORANGE AVE. SUITE 2300 ORLANDO FL 32801 US			Date Incorporated or Qualified	3a. Da	te of Last Report	
2. Principal Place of Business	2a. Mailing Address		. ·· - -		11/21/1994 4. FEI Number 51-0362588		04/07/1995 Applied For Not Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Country 24 25	Zip 29	30 Cou	ntry		B. This corporation has liability for intangible tax under s 199.032, Florida Statutes		
9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New F	legistere	d Agent
A.G.C. CO. 2300 SUNBANK CENTER 200 S. ORANGE AVENUE			82 Street Address (P.O. Box Number is Not Acceptable)				
			83		······································		
ORLANDO FL 32801			84	City	FL 85 Zip Code		
Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Florid familiar with, and accept the obligations of, Section			corp	named corpora oration's boar	ation submits this statement for the pu d of directors. I hereby accept the app	rpose of contract	changing its registered office as registered agent. I am
SIGNATURE Signature typed or printed name of registered agent a	nd title if applicable (NO	TE Registere:	1 Agor	nt signature required	d when reinstating)	DATE	
12. OFFICERS AND TITLE S NAME DEETZ, JEAN M. 108 PARK PLACE BOLLIEVA	DIRECTORS DELETE	13. 1.13 1.2 N	IAME	ADDRESS	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTORS IN 12 Change Addition

Zip Code 85 pose of changing its registered office intment as registered agent. I am DATE CERS AND DIRECTORS IN 12 Change Addition STREET ADDRESS KISSIMMEE FL 1.4 CITY-ST-ZIP CITY-ST-ZiP Change ☐ Addition DELETE 2. 1 TITLE TIME MELCHIOR, WILLIAM G. 2.2 NAME NAME 108 PARK PLACE BOULEVARD 2.3 STREET ADDRESS STREET ADDRESS KISSIMMEE FL 24 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3 1 TITLE TITLE Glance, George O. III GLANCE, GEORGE O. 1 3.2 NAME NAME 108 PARK PLACE BOULEVARD 3.3 STREET ADDRESS STREET ADDRESS KISSIMMEE FL 3.4 CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE LAWSON, BETTY B. 42 NAME NAME **800001807258** -05/03/96--01066--005 108 PARK PLACE BOULEVARD 4.3 STREET ADDRESS STREET ADDRESS KISSIMMEE FL 4.4 CITY - \$1 - ZIP CITY - ST-ZIP ***200.00 Charge Addition DELETE 5.1 TITLE PD TITLE LAGUARDIA, JOHN 52 NAME NAME 108 PARK PLACE BLVD 5 3 STREET ADDRESS STREET ADDRESS KISSIMMEE FL 34741 5.4 CITY-ST-ZIP CHTY-ST-Z:P ☐ Charige X Addition EV DELETE 6. 1 TITLE TITLE 6.2 NAME Ezzard, Mark NAME 108 Park Place Blvd. 6.3 STREET ADDRESS STREET ADDRESS Kissimmee, FL 34741 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes Forther 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 middle under cath; that I am an officer or director of the corporation or the proceiver or trustenampowered 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 erran attachment with a raddress.

SIGNATURE:

407-422-8000

CR2E034 (12/95)