

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90027 017 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000005338

1. Corporation Name
HERZOG-HART CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**1110 MONTLIMAR DRIVE
MOBILE AL 36609**

Mailing Address
**1110 MONTLIMAR DRIVE
MOBILE AL 36609**

3. Date Incorporated or Qualified

09/23/1998

4. FEI Number

04-2535140

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

1110 Montlimar Dr.

1110 Montlimar Dr. #

Suite, Apt. #, etc.

Suite, Apt. #, etc.

94980

Suite 700

City & State

City & State

Mobile, AL

Mobile, AL

Zip

Country **USA**

Zip

Country **USA**

36609

36609

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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, 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 IN 12

TITLE ☐ DELETE
NAME **P/D**
STREET ADDRESS **ESPOSITO, FRANK V**
CITY-ST-ZIP **31 ST. JAMES AVENUE
BOSTON MA 02116**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☒ Addition
V
Richard J Malone
14 Wentworth Dr.
Beverly, MA 01915

TITLE ☐ DELETE
NAME **V/D**
STREET ADDRESS **KATEON, JOHN L**
CITY-ST-ZIP **1110 MONTLIMAR DRIVE
MOBILE AL 36609**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☒ Addition
5
Joseph A. Seiders
1717 Arch St., 35th Floor
Philadelphia, PA 19103

TITLE ☐ DELETE
NAME **V**
STREET ADDRESS **RAMEY, RAY E**
CITY-ST-ZIP **6 LONGCROFT DRIVE, ALTRICHAM, CHESHIRE
ENGLAND WA144RA**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☒ Change ☐ Addition
V
Ramey, Ray E
1615 Amicitia Lane
Jewickley, PA 15143

TITLE ☐ DELETE
NAME **V**
STREET ADDRESS **BACKES, JAMES**
CITY-ST-ZIP **1110 MONTLIMAR DRIVE
MOBILE AL 36609**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☒ Addition
V
Vance, Michael G
129 mansion Dr.
Media, PA 19063

TITLE ☐ DELETE
NAME **V**
STREET ADDRESS **ANDREAS, BILL**
CITY-ST-ZIP **31 ST. JAMES AVENUE
BOSTON MA 02116**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☒ Addition
V
Collins, Timothy P
19 Lakeside Lane
Jewell, NJ 08080

TITLE ☐ DELETE
NAME **V**
STREET ADDRESS **HUBACKER, KEN**
CITY-ST-ZIP **1110 MONTLIMAR DRIVE
MOBILE AL 36609**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☒ Addition
T
Nagle, Jr., Arlington
1717 Arch St., 35th Floor
Philadelphia, PA

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 attachment with an address, with all other like empowered.

SIGNATURE: **X**

John L. Kateon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/99
Date

334 3040100
Daytime Phone #

CR2E034 (1/98)

55345.0-90027-17
F98000005338

Herzog-Hart Corp.

Document No. F98000005338

Attachment to State of Florida Profit Corporation Annual Report

Title	T		
Name	Craig H. Lewis	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Street Address	1717 Arch St., 35th Floor		
City-State-Zip	Philadelphia, PA 19103		
Title	D		
Name	John D. Sanford	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Street Address	1717 Arch St, 35th Floor		
City-State-Zip	Philadelphia, PA 19103		
Title	D		
Name	Richard G. Giannone	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Street Address	1717 Arch St, 35th Floor		
City-State-Zip	Philadelphia, PA 19103		
Title	D		
Name	Robert J. Giorgio	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Street Address	1717 Arch St, 35th Floor		
City-State-Zip	Philadelphia, PA 19103		