

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Apr 19, 1999 8:00 am  
Secretary of State

04-19-1999 90059 049 \*\*\*150.00

DOCUMENT # H04220

1. Corporation Name  
HEARTLAND CABLE, INC.

Principal Place of Business  
C/O BUTTONWOOD BAY  
10001 US 27 SOUTH  
SEBRING FL 33870

Mailing Address  
C/O BUTTONWOOD BAY  
10001 US 27 SOUTH  
SEBRING FL 33870

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/17/1984

4. FEI Number

59-2466593

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

21 3000 Tanglewood Pky

Suite, Apt. #, etc.

22

City & State

23 Sebring, FL

Zip

24 33872

Country

25 Highlands

2a. Mailing Address

26 3000 Tanglewood Pky

Suite, Apt. #, etc.

27

City & State

28 Sebring, FL

Zip

29 33872

Country

30 Highlands

9. Name and Address of Current Registered Agent

GREYTAK, JOHN  
10001 U.S. 27TH SOUTH  
SEBRING FL 33870

10. Name and Address of New Registered Agent

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

TITLE PD ☒ DELETE

NAME BURTON, MARVIN  
STREET ADDRESS 10001 US 27 SOUTH  
CITY-ST-ZIP SEBRING FL

TITLE SDT ☐ DELETE

NAME BURTON, LORRAINE  
STREET ADDRESS 10001 U.S. 27TH SOUTH  
CITY-ST-ZIP SEBRING FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME John J. Greytak  
1.3 STREET ADDRESS 3000 Tanglewood Pky  
1.4 CITY-ST-ZIP Sebring, FL 33872

2.1 TITLE SDT ☒ Change ☐ Addition

2.2 NAME John P. Greytak  
2.3 STREET ADDRESS 3000 Tanglewood Pky  
2.4 CITY-ST-ZIP Sebring, FL 33872

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99

941-402-0769

Date

Daytime Phone #

CR2E034 (11/98)

04/19/99