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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-S1-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Feb 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J09839

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HERITAGE SPACECOAST YACHTS, INC.

Principal Place of Business Mailing Address 941 THISTLE LN. 941 THISTLE LN. MAITLAND FL 32751 MAITLAND FL 32751-3736 3. Date Incorporated or Qualified 3a. Date of Last Report 04/14/1986 04/22/1996 2. Principal Place of Business 2a. Mailing Address 26 941 N. Thistle Ln 4. FEI Number Applied For 941 N. Thistle La 26 59-2687323 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WELCH, STANFORD, A 941 N THISTLE LANE Street Address (P.O. Box Number is Not Acceptable) MAITLAND FL 32751 83 84 City 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 product rame of registered agont and title d applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. THE ■ DELETE 1.1 TITLE Change Addition WELCH, STANFORD A. NAME 12 NAME 941 N. Thistle Lane 941 THISTLE LANE STREET ADDRESS 1.3 STREET ADDRESS MAITLAND FL CITY-ST-7IP 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIF 2.4 CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 32 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-S1-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4 2 NAME STREET ADDRESS **43 STREET ADDRESS** CITY - ST-ZIP 4.4 CiTY+ST-ZIP DELETE TITLE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY - ST - ZIP 5 4 CITY - ST - ZIP DELETE THEF 61 TITLE ☐ Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE

SIGNATURE

Description of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that 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 or supplem

64 CITY - ST - ZIP