

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

FILED
May 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J21946 (5)
1. Corporation Name

HARTFORD SOUTH, INCORPORATED

Principal Place of Business 7326 S. Orange Ave. Orlando, FL 32809	Mailing Address 7326 S. Orange Ave. Orlando, Florida 32809
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3. Date Incorporated or Qualified 07/01/1986	3a. Date of Last Report 03/06/96
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. F.E. Number 59-2690082 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

10. Name and Address of New Registered Agent

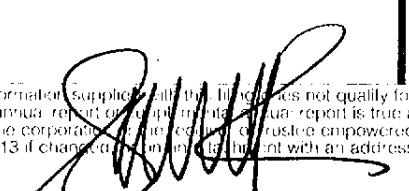
81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 re-stating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS SIMON, RONALD 218 HIGHWOOD GLASTONBURY CT	11 TITLE	☐ Change ☐ Addition
NAME	DT SIMON, FREDERICK AVONSIDE AVON CT	12 NAME	☐ Change ☐ Addition
STREET ADDRESS	D SIMON, NEAL A. 17 WOODHAVEN DR. SIMSBURY CT	13 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	PD RINTELMANN, JAY 179 TIM TAM CT. LAKE MARY, FL	14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	☐ Change ☐ Addition
STREET ADDRESS		23 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	☐ Change ☐ Addition
STREET ADDRESS		33 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	☐ Change ☐ Addition
STREET ADDRESS		43 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	☐ Change ☐ Addition
STREET ADDRESS		53 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	☐ Change ☐ Addition
STREET ADDRESS		63 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied in 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 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 registered 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 from an individual to a firm with an address.

SIGNATURE:  JAY A. RINTELMANN, PRESIDENT 5/20/97 (407)857-9392

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE (Month/Day/Year) AND TELEPHONE NUMBER

CR2E034 (9/96)