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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

J39889

HARTE CREEK DEVELOPMENT CO.

FILED	
May 20 1998 8:00an	1
Secretary of State	

,					
Principal Plac	e of Business	Mailing Address		, , , , , , , , , , , , , , , , , , , ,	idia Sidii dibil dibil didir indi
C/O UZ PAT		C/O LIZ PATERI			
	venue north Burg Fl 33713	2837 21ST AVENUE NO ST. PETERSBURG FL 3		DO NOT WRITE IN TH	IS SPACE
J. TEIEMOL	AND TE COLLEGE	on revenue on the	0 ,10	3. Date Incorporated or Qualified 10/29/1986	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	•	26		59-2896086	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	ю	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	— ' — '
24	25 B. Name and Address of Curr	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registers	∐ Yes ∐ No
		aut uadistalan waait	81 Name	10. Hailing and Address of Hew Hedievald	O Agoin
	ite ri , liz 37 21 St avenue North				
	. PETERSBURG FL 33713		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
31	. reiensbung ft 33/13		83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Stat	utes, the above-named co		
office or i	registered agent, or both, in the Sta im familiar with, and accept the obli	ite of Florida. Such change was liciations of Section 60 7 0 505. F	authorized by the corporational Statutes	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
İ		A CONTRACTOR OF THE CONTRACTOR	is to a state of the state of t		
SIGNATURE	Signature, typed or printed name of registered.	a jest and till if apple able (NO	OTE: Registered Agent signature requ	uired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	VO.	L DELETE	1 1 TITLE		Change Addition
NAME	EVANS, R. W.		12 NAME		
STREET ADDRESS	1146 41ST AVE N.E.		1.3 STREET ADDRESS		
CITY-ST-ZIP	\$T. PETERSBURG FL		1.4 CITY - ST - ZIP		
TITLE	STD	☐ DELETE	2.1 TITLE		Change Addition
NAME	PATERI, LIZ		2.2 NAME		
STREET ADDRESS	\$50 ROBIN HILL CIR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	B RANDON FL	DELETE	2. 4 CITY - ST - ZIP		Change Addition
TITLE		L. DECETE			T Cuaribe TT variation
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY~ST~ZIP 4.1 TITLE		Change Addition
NAME		L_1 octive	4. 2 NAME		C ondago C rounion
STREET ADDRESS					
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		OELE TE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 iffection and of the corporation with an address