

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
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90026 049 ***150.00

DOCUMENT # J51972

1. Corporation Name

HEARTLAND PARKS HOMES, INC.



Principal Place of Business

6192 SW HWY 72
% WILLIAM J DOLAN
ARCADIA FL 34266
US

Mailing Address

6192 SW HWY 72
% WILLIAM J DOLAN
ARCADIA FL 34266
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/09/1987

4. FEI Number

59-2750519

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 6192 S.W. Hwy 72

2a. Mailing Address

26 6192 S.W. Hwy 72

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Arcadia, FL.

City & State

28 Arcadia, FL.

Zip

24 34266

Country

25 US

Zip

29 34266

Country

30 US

9. Name and Address of Current Registered Agent

DOLAN, WILLIAM J.
6192 SW HWY 72
ARCADIA FL 34266

10. Name and Address of New Registered Agent

81 Name

Gerald F. Fennell

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

6192 S.W. Hwy 72

83

84 City

Arcadia

FL

85 Zip Code

34266

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]

Gerald F. Fennell, Pres. 1-13-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
DOLAN, WILLIAM J
STREET ADDRESS 6192 SW HWY 72
CITY-ST-ZIP ARCADIA FL

TITLE ☒ DELETE

NAME VPD
DOLAN, MARK A.
STREET ADDRESS 6192 SW HWY 72
CITY-ST-ZIP ARCADIA 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 ☒ Change ☐ Addition

1.2 NAME D
DOLAN, WILLIAM J.
1.3 STREET ADDRESS P.O. Box 743
1.4 CITY-ST-ZIP Arcadia, FL. 34266

2.1 TITLE PD ☐ Change ☒ Addition

2.2 NAME Gerald F. Fennell
2.3 STREET ADDRESS 6192 S.W. Hwy 72
2.4 CITY-ST-ZIP Arcadia, FL. 34266

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]* Gerald F. Fennell, Pres. 1-13-99 941-494-3004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)

0484174