

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JUL 28 AM 10:50

DOCUMENT #

J95601

1. Corporation Name

HERSCHO PROPERTIES, INC.

Principal Place of Business

Mailing Address

264 Snowfields Run
Heathrow, FL., 32746
US

264 Snowfields Run
Heathrow, FL., 32746
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERNDON, A. B. JR.
264 SNOWFIELDS RUN
HEATHROW, FL., 32746

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VPSD ☒ DELETE
NAME HERNDON, JUNE G
STREET ADDRESS 264 SNOWFIELDS RUN
CITY-ST-ZIP HEATHROW, FL., 32746 ☐ DELETE

1.1 TITLE VPSP ☐ Change ☒ Addition
1.2 NAME BROWN, JENNIFER H.
1.3 STREET ADDRESS 336 Stonecutters Cove
1.4 CITY-ST-ZIP Stockbridge, GA, 30281

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE VPASSTSD ☐ Change ☒ Addition
2.2 NAME HERNDON, A. B. III
2.3 STREET ADDRESS LEXINGTON APT 1107, 510 Old Hickory
2.4 CITY-ST-ZIP NASHVILLE, TN, 37209 BLVD

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME 600002952856--3
3.3 STREET ADDRESS -08/06/99--01067--020
3.4 CITY-ST-ZIP *****61.25 *****61.25

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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: A B Herndon, Jr

July 26, 1999

CR2E034 (11/98)