FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J95601

1. Entity Name

HERSCHO PROPERTIES, INC.



FILED Feb 18, 2005 8:00 am Secretary of State

02-18-2005 90046 046 ***150.00

DO NOT WRITE IN THIS SPACE					40019805		
Principal Place of Business 2441 STONEVIEW ROAD Suite, Apt. #, etc.		3. Mailing Address 2441 STONEVIEW ROAD Suite, Apt. #, etc.		<u>)</u>	DO NOT WRITE IN THI	S SDACE	
outo, Apt.	, cto.	oute, Apt. #, etc.			DO NOT WHITE IN THE	3 SFACE	
City & State ORLANDO, FL., 32806		City & State ORLANDO, FL., 32806			El Number 59-2849896	Applied For Not Applicable	
Zip	Country	Zip	Country	5 . C	Certificate of Status Desired	\$8.75 Additional Fee Required	
			A1	7. Na	me and Address of Current Register	ed Agent	
DO NOT WOITE			Name HERNDON, a. b., Jr.				
DO NOT WRITE			Street Address (P.O. Box Number is Not Acceptable)				
IN THIS SPACE			2441 STONEVIEW ROAD				
			City	RLAND	, F	L 32806	
The above named entity submits this statement for the purpose of changing its registered offi					-		
	ions of registered agent.	·	-				
SIGNATURE .	Signature, typed or printed name of registered agent	and litle if applicable. (NOTE: R	egistered Agent signature	required when rea	nstating) DATE		
	nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25	t.			Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
Make Check	Payable to Florida Department of OFFICERS AND	Special confined by					
TITLE	VSD	51112010110	TITLE		<u>* </u>		
NAME	BROWN, JENNIFER	н.	NAME	u.			
STREET ADDRESS	333 STONECUTTERS COVE		STREET ADDRESS	4			
CITY-ST-ZIP	STOCKBRIDGE, GA.		CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			
TITLE	VSD		TITLE				
NAME CIRCEL ADDRESS	HERNDON, A. B., III		NAME			1	
STREET ADDRESS CITY-ST-ZIP	740 N. WICKSHIRE		STREET ADDRESS CITY-ST-ZIP				
TITLE	BRENTWOOD, TN.,	37027	TITLE				
NAME	STUARTYNJEFFREY	VPS	NAME	Marie Agentina	*		
STREET ADDRESS	STUART, JEFFREY		STREET ADDRESS	- 14A	ON NOT WO	ممير عربيد و	
CITY-ST-ZIP -	_1 .DRENNEN RD	 -	CITY-ST-ZIP		DO-NOT-WR	III C	
TITLE	ORLANDO, FL., 32	806 32806	TITLE	ar assages	IN THIS SPA	CE	
NAME	PTD	TD	NAME		IN IUIO OLU		
STREET ADDRESS	HERNDON, A. B.,		STREET ADDRESS	ė .			
CITY-ST-ZIP	2441 STONEVIEW R		CITY-ST-ZIP				
TITLE	ORLANDO, FL., #%	ж ля 32000	TITLE	4			
NAME .	VSD	,	NAME				
STREET ADDRESS	HERNDON, BETTY V		STREET ADDRESS CITY-ST-ZIP				
сітү-э улчү	@\$\$U STONEVIEW R						
TITLE	ORLANDO, FL., #%	1XXIX 32806	TITLE				
NAME STREET ADDRESS	•		NAME STREET ADDRESS	+		,	
CITY-ST-ZIP			CITY-ST-ZIP				
			- 1			1	

12. 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fob 14 2005 407 229 2170