


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

APPROVED
AND
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1997 MAY -1 PM 4:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 410880 1. Corporation Name Southern Heritage Development Inc.			
Principal Place of Business		Mailing Address	
2. Principal Place of Business		2a. Mailing Address	
21	1485 Market St.	26	P.O. 3907
22	City & State	27	City & State
23	Tallahassee, FL	28	Tallahassee, FL
24	32312	29	32315
25	Leon	30	Leon
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
R. Richard Yates Jr.		81 Name James R. Guerino	
		82 Street Address (P.O. Box Number is Not Acceptable) 1485 Market St.	
		83	
		84 City Tallahassee	
		85 Zip Code FL 32315	
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: <i>[Signature]</i> DATE: 4/30/97			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	President/Director
STREET ADDRESS		1.3 STREET ADDRESS	Yates R. Richard
CITY- ST- ZIP		1.4 CITY- ST- ZIP	1485 Market St.-- Talla, FL 32312
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	V.P./Director
STREET ADDRESS		2.3 STREET ADDRESS	James R. Guerino
CITY- ST- ZIP		2.4 CITY- ST- ZIP	1485 Market St.-- Talla, FL 32312
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	600002168836
STREET ADDRESS		4.3 STREET ADDRESS	-05/07/97--01004--016
CITY- ST- ZIP		4.4 CITY- ST- ZIP	****825.00 ****165.00
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		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. SIGNATURE: <i>[Signature]</i> JAMES R. GUERINO 4/30/97 704 562-0124			

CR2E034 (9/96)