2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Feb 03, 2006 8:00 am Secretary of State 02-03-2006 90013 021 ***150.00 DOCUMENT #L07217 HERNON MANUFACTURING, INC. Principal Place of Business Mailing Address 121 TECH DR POST OFFICE BOX 2809 ORLANDO, FL 32802-2809 US SANFORD, FL 32771 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 01112006 Chg-P City & State City & State 4. FEI Number Applied For 59-2965375 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HEEKIN, JAMES F., JR. Street Address (P.O. Box Number is Not Acceptable) 215 N. EOLA DRIVE ORLANDO, FL 32802 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Defete TITLE ☐ Change Addition ARNON, HERTZEL (HARRY) NAME NAME 121 TECH DRIVE STREET ADDRESS STREET ADDRESS SANFORD, FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME ARNON, KAREN STREET ADDRESS 121 TECH DRIVE STREET ADDRESS SANFORD, FL 32771 CITY-ST-ZIP CITY-ST-ZIP Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

ATTACHMENT

40008406

LOTALT 215 NORTH EOLA DRIVE ORLANDO, FLORIDA 32801

450 SOUTH ORANGE AVENUE, SUITE 800 ORLANDO, FLORIDA 32801

LOWNDES DROSDICK DOSTER KANTOR & REED, P.A.

Attorneys at Law

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GAIL S. ANDRÉ
CORPORATE PARALEGAL
North Eola Drive Office
Direct Dial: (407) 418-6203
E-mail: gail.andre@lowndes-law.com

January 31, 2006

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

7005 1820 0003 0102 1145

Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: 2006 For Profit Corporation Annual Report

Hernon Manufacturing, Inc.

Dear Sir/Madam:

Enclosed herewith for filing please find an executed 2006 For Profit Corporation Annual Report for Hernon Manufacturing, Inc., together with our client's check number 001711 payable to the Department of State in the amount of \$150.00 representing the filing fee.

Thank you for your assistance in this matter.

Gail S. André

Corporate Paralegal to James F. Heekin, Jr.

GSA/cj Enclosures 0016061/062717/722603/32