

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

FILED
May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. McPham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L24926 (2) 1. Corporation Name BLUE HERON DEVELOPMENT, INC.			
Principal Place of Business 1925 S. E. 9TH AVENUE OKEECHOBEE FL 34974		Mailing Address 1925 S. E. 9TH AVENUE OKEECHOBEE FL 34974	
2. Principal Place of Business 21 100 S.E. 8th Ave Suite, Apt. #, etc 22 City & State 23 Okeechobee FL Zip 24 34974		2a. Mailing Address 26 100 S.E. 8th Ave. Suite, Apt. #, etc 27 City & State 28 Okeechobee, FL Zip 29 34974	
9. Name and Address of Current Registered Agent BAUGHMAN, JAMES R. 1925 S. E. 9TH AVENUE OKEECHOBEE FL 34974		10. Name and Address of New Registered Agent 81 Name James R. Baughman 82 Street Address (P.O. Box Number is Not Acceptable) 100 S.E. 8th Ave. 83 84 City Okeechobee 85 Zip Code FL 34974	
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 _____ DATE _____ (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS			
TITLE	D	11. TITLE	D - VICE PRESIDENT
NAME	BROWN, DONALD W.	12. NAME	Jones, Bernard
STREET ADDRESS	2461 N.E. 6TH STREET	13. STREET ADDRESS	6207 Royal Palm Bbeach Blvd.
CITY-ST-ZIP	OKEECHOBEE FL	14. CITY-ST-ZIP	Royal Palm Beach, Fl. 33412
TITLE	D	21. TITLE	
NAME	BROWN, LINDA FAYE	22. NAME	
STREET ADDRESS	2461 N.E. 6TH STREET	23. STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL	24. CITY-ST-ZIP	
TITLE	D	31. TITLE	
NAME	BROWN, MARTIN L.	32. NAME	
STREET ADDRESS	2472 N.E. 6TH STREET	33. STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL	34. CITY-ST-ZIP	
TITLE	D - PRESIDENT	41. TITLE	
NAME	BROWN, EDITH L.	42. NAME	
STREET ADDRESS	2472 N.E. 6TH STREET	43. STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL	44. CITY-ST-ZIP	
TITLE	D	51. TITLE	
NAME	BAUGHMAN, JAMES R.	52. NAME	
STREET ADDRESS	1320 SE 23RD STREET	53. STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL	54. CITY-ST-ZIP	
TITLE	D	61. TITLE	
NAME	BAUGHMAN, JOSEPHINE C.	62. NAME	
STREET ADDRESS	1320 SE 23 AVE	63. STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL	64. CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/24/1989	
4. FEI Number 65-0166184	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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: **JAMES R. BAUGHMAN**

2-21-98 941-467-4442

CR2E034 (10/97)