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**

DOCUMENT # L24926

1. Corporation Name

BLUE HERON DEVELOPMENT, INC.

FILED	
Apr 22, 1999 8:00	am
Secretary of State	e

04-22-1999 90126 027 ***150.00



Division In	- A Desired	12-W-+ Add			
Principal Place of Business Mailing Address					
100 SE 8TH A		100 SE 8TH AVE			
OKEECHOBEE	FL 349/4	OKEECHOBEE FL 34974 US			DO NOT WRITE IN THIS SPACE
		••			3. Date Incorporated or Qualifed
}					10/24/1989
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21	· · · · · · · · · · · · · · · · · · ·	26			65-0166184 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & Stat	е	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible
24	25	29 30	<u> </u>		Personal Property Tax. Yes No
	9. Name and Address of Current	Registered Agent	81	Nama	10. Name and Address of New Registered Agent
BALL	GHMAN, JAMES R.		81	Name	
	SE 8TH AVE		82	Street	Address (P.O. Box Number is Not Acceptable)
	ECHOBEE FL 34974		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 r agent. I a	egistered agent, or both, in the State o m familiar with, and accept the obligat	of Florida. Such change was auth ions of, Section 607.0505, Florid	ionzed by a Statutes	the corp	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	, ,				
	Signature, typed or printed name of registered agent			t signature o	required when reinstating) DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 VICE PRESIDENTAND ACCHANGE DAIDING Addition JONES, BERNAND BEACH BLVD 6237 ROSAL PALM BEACH BLVD
TITLE	DVP	☐ DELETE	1.1 TITLE		TONES BEENAND Change Addition
NAME	JONES, BERNARD		1.2 NAME		1237 ROSALPALM BEACH BLUD
STREET ADDRESS	6207 ROYAL PALM BEACH RD		1,3 STREET	ADDRESS	D 211 2 2 2 11 2 -
CITY-ST-ZIP	ROYAL PALM BEACH FL 33412		1.4 CITY-S	-ZIP	ROYAL PALM BEACH, FL 33412
TITLE	PD	DELETE	2.1 TITLE		' ☐ Change ☐ Addition
NAME	BROWN, EDITH L.	•	2.2 NAME		عم ،
STREET ADDRESS	2472 N.E. 6TH STREET	-	2.3 STREET	ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL		2. 4 CITY-S	T- ZIP	ACCE DE UT
TITLE	D	☐ DELETE	3.1 TITLE		PRESIDENT BAUGHMAN, JAMES R. Change MAddition 1320 SE 2310 Street
NAME	BAUGHMAN, JAMES R.		3.2 NAME		12 20 SG 23/d Street
STREET ADDRESS	1320 SE 23RD STREET		3.3 STREET		MYCGONNOCE EL 200711
CITY-ST-ZIP	OKEECHOBEE FL		3.4. CITY-S	T-ZIP	OKEGCHOBEE, FL 34974
TITLE		☐ DELETE	4,1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS		•	4.3 STREET		
CITY+ST-ZIP			4.4 CITY-S	- ZIP	, , , , , , , , , , , , , , , , , , ,
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	ADDOCOC	
STREET ADDRESS	·		5.3 STREET		
CITY-ST-ZIP		[] pereze	5.4 CITY-ST 6.1 TITLE	-ZIP	Change Addition
TITLE		DELETE			Change Addition
NAME	1		6.2 NAME		i
	•				•
STREET ADDRESS			6.3 STREET		

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:

941-447-4442