

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 10:17

DOCUMENT # L33650 (7)
1. Corporation Name
HEARTWOOD CONSTRUCTION, INC.

Principal Place of Business Mailing Address
3920 MURDOCK AVE 3920 MURDOCK AVE
SARASOTA FL 34231 SARASOTA FL 34231

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country

3. Date Incorporated or Qualified 3a. Date of Last Report
11/28/1989 03/07/1994
4. FEI Number Applied For
65-0162845 Not Applicable
5. Certificate of Status Desired \$0.75 Additional
Fee Required
6. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent
MITCHELL, ROBERT T.
3920 MURDOCK AVE
SARASOTA FL 34231

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 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 _____
Agent or Registered Agent Name of registered agent and his title (Printed Name) (Typed Name)

12. OFFICERS AND DIRECTORS
11a. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11b. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11c. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11d. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11e. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11f. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11g. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11h. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11i. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11j. TITLE
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STREET ADDRESS
CITY, ST, ZIP
11k. TITLE
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11l. TITLE
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11m. TITLE
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11n. TITLE
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11o. TITLE
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11p. TITLE
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11q. TITLE
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11r. TITLE
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11s. TITLE
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11t. TITLE
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11u. TITLE
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11v. TITLE
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11w. TITLE
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STREET ADDRESS
CITY, ST, ZIP
11x. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11y. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11z. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

14. I, the undersigned, certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), Florida Statutes. I further certify that the information and data 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 liquidator of the corporation or authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears on Block 12 or Block 13 of this report as an officer, director, or authorized person.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT T. MITCHELL 3/9/95 813 921 4696