

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 MAR 10 AM 9:56

DOCUMENT # **L53680** (9)

1. Corporation Name  
**HERRICK SOUTHEAST, INC.**

Principal Place of Business Mailing Address  
**C/O SOBERING & GRAY, P.A.**  
**201 S. ORANGE AVE., SUITE 760**  
**ORLANDO FL 32801**  
USX  
**C/O SOBERING & GRAY, P.A.**  
**201 S. ORANGE AVE., SUITE 760**  
**ORLANDO FL 32801**  
USX

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/28/1990** 3a. Date of Last Report **03/28/1994**  
4. FEI Number **59-2894212** Applied For  
Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 **755 Raintree Drive** 26 **755 Raintree Drive**  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 **Suite 200** 27 **Suite 200**  
City & State City & State  
23 **Carlsbad, CA** 28 **Carlsbad, CA**  
Zip Country Zip Country  
24 **90220** 25 **US** 29 **90220** 30 **US**

9. Name and Address of Current Registered Agent  
**SOBERING & GRAY, P.A.**  
**201 S. ORANGE AVE., STE 760**  
**201 S. ORANGE AVE., SUITE 1000**  
**ORLANDO FL 32801**

10. Name and Address of New Registered Agent  
B1 Name **Sobering, Gray & White, P.A.**  
B2 Street Address (P.O. Box Number is Not Acceptable)  
**201 S. Orange Ave., Suite 760**  
B3  
B4 City **Orlando** FL B5 Zip Code **32801**

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 *W. Wayne Gray Jr.* **WESIDONT** 2-9-95  
Signature, typed or printed name of registered agent and title (S, Secy, Treas, etc.) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HERRICK, WILLIAM C.</b>	1.2 NAME	
STREET ADDRESS	<b>755 RAIN TREE DR. #200</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CARLSBAD CA</b>	1.4 CITY - ST - ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		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		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		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		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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William C. Herrick* **William C. Herrick** 2/11/95 619-438-6661  
Signature and typed or printed name of signing officer or director