FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **L84643** **(0)**

1. Corporation Name

HARTNIG ASSOCIATES CORP.

Principal Place of Business	Mailing Address
4026 S.W. SAN CLEMENTE COURT PALM CITY FL 34990	4026 S.W. SAN CLEMENTE COURT PALM CITY FL 34990

3. Date Incorporated or Qualified: **06/29/1990**
3a. Date of Last Report: **02/08/1995**
4. FEI Number: **65-0206517** ☐ 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
21 Street Address
22 City & State
23 Zip 24 County 25

2a. Mailing Address
26 Street Address
27 City & State
28 Zip 29 County 30

9. Name and Address of Current Registered Agent

HARTNIG, ANN
4026 S.W. SAN CLEMENTE COURT
PALM CITY FL 34990

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 617.1502, 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TITLE	P ☐ DELETE	1 TITLE	☐ Change ☐ Addition
2 NAME	HARTNIG, SCOTT	2 NAME	
3 STREET ADDRESS	1135 SW SAND OAK DR	3 STREET ADDRESS	
4 CITY-ST-ZIP	PALM CITY FL	4 CITY-ST-ZIP	
5 TITLE	S ☐ DELETE	5 TITLE	☐ Change ☐ Addition
6 NAME	HARTNIG, ANN	6 NAME	
7 STREET ADDRESS	4026 SW SAN CLEMENTE CT	7 STREET ADDRESS	
8 CITY-ST-ZIP	PALM CITY FL	8 CITY-ST-ZIP	
9 TITLE	D ☐ DELETE	9 TITLE	☐ Change ☐ Addition
10 NAME	HARTNIG, SEYMORE	10 NAME	
11 STREET ADDRESS	4026 SW SAN CLEMENTE CT	11 STREET ADDRESS	
12 CITY-ST-ZIP	PALM CITY FL	12 CITY-ST-ZIP	
13 TITLE	☐ DELETE	13 TITLE	☐ Change ☐ Addition
14 NAME		14 NAME	
15 STREET ADDRESS		15 STREET ADDRESS	
16 CITY-ST-ZIP		16 CITY-ST-ZIP	
17 TITLE	☐ DELETE	17 TITLE	☐ Change ☐ Addition
18 NAME		18 NAME	
19 STREET ADDRESS		19 STREET ADDRESS	
20 CITY-ST-ZIP		20 CITY-ST-ZIP	
21 TITLE	☐ DELETE	21 TITLE	☐ Change ☐ Addition
22 NAME		22 NAME	
23 STREET ADDRESS		23 STREET ADDRESS	
24 CITY-ST-ZIP		24 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this report is true, voluntarily furnished and 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 added by amendment with an address.

SIGNATURE: Scott Hartnig
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96 (407) 2865964
Date Daytime Phone #

CR2E034 (12/95)