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May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P10579

(1)

1. Corporation Name

HEARTLAND INDUSTRIES, INC. (DE)

Principal Place of Business

11590 N MERIDIAN ST  
SUITE 690  
CARMEL IN 46032  
US

Mailing Address

P O BOX 1770  
CARMEL IN 46032-6770  
US



3. Date Incorporated or Qualified

06/26/1986

3a. Date of Last Report

04/29/1996

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

4. FEI Number

22-2715405

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

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HATES STREET  
SUITE 105  
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME HETTLINGER, RICHARD R  
STREET ADDRESS 11590 N MERIDIAN ST SUITE 690  
CITY- ST- ZIP CARMEL IN  
TITLE S  
NAME MANDELL, EDWARD R.  
STREET ADDRESS 1211 6TH AVE 17TH FLOOR  
CITY- ST- ZIP NEW YORK NY  
TITLE TD  
NAME KIDD, WILLIAM J.  
STREET ADDRESS THREE PICKWICK PLAZA  
CITY- ST- ZIP GREENWICH CT 06830  
TITLE D  
NAME MILLER, GENE  
STREET ADDRESS 1299 OCEAN AVE  
CITY- ST- ZIP SANTA MONICA CA 90401  
TITLE D  
NAME SULAT, JAMES  
STREET ADDRESS STANFORD UNIV HOSPITAL  
CITY- ST- ZIP STANFORD CA 94305  
TITLE V  
NAME KNEIFEL, HARRY R  
STREET ADDRESS 11590 N MERIDIAN ST SUITE 690  
CITY- ST- ZIP CARMEL IN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

14. I do 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:

*Ronald W. Martin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald Martin, VP

4/22/97

317-846-9720

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CR2E034 (9/96)