

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JUL -6 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000078065 (7)

1. Corporation Name

HEART WORKCAMP INC.

Principal Place of Business

**1670 TREMONT LANE
WINTER PARK FL 32792**

Mailing Address

**1670 TREMONT LANE
WINTER PARK FL 32792**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

10/20/1994

4. FEI Number

APPLIED FOR 59-3281999

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. The corporation has failed to file annual tax returns under 1990-1992
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. Suite Apt. #, etc.

23. City & State

24. Zip

25. State

2a. Mailing Address

26. Suite Apt. #, etc.

28. City & State

29. Zip

30. State

9. Name and Address of Current Registered Agent

**WALKER, STEVEN
1670 TREMONT LANE
WINTER PARK FL 32792**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

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 of Registered Agent or Registered Agent and the Corporation)

(Signature of Registered Agent or Registered Agent and the Corporation)

(Date)

12. OFFICERS AND DIRECTORS

NAME **P**
NAME **WALKER, STEVEN**
STREET ADDRESS **C/O 1670 TREMONT LANE**
CITY, STATE, ZIP **WINTER PARK FL 32792**

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

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