~ 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 09, 2007 8:00 am Secretary of State DOCUMENT # P95000008586 05-09-2007 90111 017 ***158.75 1. Entity Name HERITAGE PARTNERS GROUP XVII, INC. Principal Place of Business Mailing Address 40102004 5505 N ATLANTIC AVE 5505 N ATLANTIC AVE COCOA BEACH, FL 32931 US COCOA BEACH, FL 32931 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 04122007 Chg-P CR2E034 (12/06) #108 # 108 City & State City & State 4. FEI Number Applied For 59-3292655 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KINCAID, JAMES Street Address (P.O. Box Number is Not Acceptable) 5505 N ATLANTIC AVE 115 5505 N AtlANtic Ave., # 108 COCOA BEACH, FL 32931 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. James KincoiD UP 4126107 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 11 TITLE Delete TITLE Change Addition MCPHILLIPS, JACQUELINE NAME NAME STREET ADORESS 5505 N ATLANTIC AVE #115 STREET ADDRESS COCOA BEACH, FL 32931 CITY-ST-ZIP CITY-ST-ZIP TITLE . Delete TITLE ☐ Change ☐ Addition MCPHILLIPS, MICHAEL NAME NAME STREET ADDRESS 5505 N ATLANTIC AVE: #115 STREET ADDRESS COCOA BEACH, FL 32931 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change HARDING, NEAL NAME NAME 5505 NATIANTIC AVE., HIOS STREET ADDRESS 5505 N ATLANTIC AVE 115 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH, FL 32931 ☐ Addition ☐ Delete TITLE TITI F KINCAID, JAMES NAME NAME 5505 NAtlantic Ave, # 108 STREET ADDRESS 5505 N ATLANTIC AVE 115 STREET ADDRESS COCOA BEACH, FL 32931 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITE F ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

James Kinco O 412607 321-799-4090

FILED