FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000013977 (0)

CLEAR	TITLE OF HERNA	NDO, INC.	(0)			(1)	
Principal Plac	e of Business	Mailing	Address			1860 (1881) 1880 (1881)	
8221 RIVER COUNTRY DR. 8221 RIVER COUNTRY DR. SPRING HILL FL 34607 SPRING HILL FL 34607 US				DO NOT WRITE IN THIS SPACE			
		•			3. Date Incorporated or Qualified 02/17/1995		
 			ling Address		4. FEI Number	Applied For	
Suite, Apt.	# oto	26	e, Apt. #, etc.		59-3293063	Not Applicable	
22 Suite. Apr.	#, etc.	27	e, Api. #, eic.		I B L'emiticate of Status Desired I I	3.75 Additional Fee Regulred	
City & Stat	e		& State		6. Election Campaign Financing \$5.00 May Be		
23		28			· · · ·	 	
Zip	Country	``		Country	8. This corporation owes or has paid the current y		
24	9 Name and Addre	29 ss of Current Registered	Agent	30	Personal Property Tax due June 30. Yes		
SPRING HILL FL 34607				ess (P.O. Box Number is Not Acceptable) 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 register 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 politic name of registered agent and third applicable (NOTE: Registered Agent signature required when reinstalled). 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	D		DELETE	1.1 T(TLE		hange 🔲 Addition	
NAME	SIMPSON, CYNTH			1.2 NAME	Cynthia Brundage 5238 Ansley Street 5pring Hill, R 34606	l:	
STREET ADDRESS	8221 RIVER COUN	TRY DR		1.3 STREET ADDRESS	238 Anstey Street	ļ	
CITY-ST-ZIP TITLE	SPRING HILL FL		DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	DPCING MILL 5-1000 TIE	hange Addition	
NAME			occele	2.2 NAME	-	Tradition	
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2. 4 CITY - ST - ZIP			
TALE			DELETE	3.1 TITLE	□ c	hange	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP		····		3.4. CITY-ST-ZIP			
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NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
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NAME .				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE			DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		hange Addition	
NAME			DELETE	6.2 NAME		mango reductio()	
STREET ADDRESS				6.3 STREET ADDRESS			
SIRELI AUUNESS				0.0 OTRLET AUDITEDO			

14. Thereby 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

Hundaar

3-23-98 (352)597-4485

FILED

Mar 30 1998 8:00am

Secretary of State