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PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000029754 (5)

HERITAGE CAPITAL, INC.

FILED Mar 14 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address			T I DE NI DEL SID I DI DI DIRILI DE LI IL EDERI DE	FUR MU (III 1141	3 3 1 1 1 1 1 1 1 1 1		
2310 LAKELAND HILLS BLVD. LAKELAND FL 33805		P.O. BOX 2784 LAKELAND FL 33806-2784								
						3. Date Incorporated or Qualified 04/17/1995	1	Date of Last I /15/1996	Report	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number			pplied For	
21		26				59-3309126			ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u>}</u>			5. Certificate of Status Desired			Additional lequired	
22 City & Ciple		City & State	City & State							
City & State						6. Election Campaign Financing Trust Fund Contribution			May Be	
Zip Country			Z(p) Country			Trust Fund Contribution				
24	25 29		30			Florida Statutes		No	3, 199,032,	
E-1	9. Name and Address of Curre					10. Name and Address of New F		Agent		
					81 Name					
	LAKELAND HILLS BLVD.		82 Street Ad			ess (P.O. Box Number is Not Accept	ablo)			
	LAND FL 33805		82 Street Ad			iss (r.o. box Number is Not Accept	аысу			
			1	83						
				84	City	· · · · · · · · · · · · · · · · · · ·		OF Zio	Code	
					City		FI			
11. Pursuant office or ragent. La	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the orbits	02 and 607.1508, Florida Statu of Horida, Such change was gations of, Section 607.0505, F	ites, the ab authorized lorida State	ove by tules	named corpo the corporation	oration submits this statement for the on's board of directors. I hereby acc			its registered s registered	
SIGNATURE	Monature typed or present name of equations		ilk: Ban erinad	1 Acres	t cionaturo son isto	d when reinstating)	7-10	77.		
12.		ND DIRECTORS	I 13.	i rajji: i	ad to the regione	ADDITIONS/CHANGES TO OFF			RS IN 12	
TITLE /	D	☐ DELETE	1.1 307	LE				Change	Addition	
NAME	HARPER, ROBERT F IV		1.2 NA	ME						
STREET ADDRESS	P.O. BOX 2784 N/A		1.3 STREE		DORESS					
CITY-ST-ZIP	LAKELAND FL 33806		1.4 CIT	IY-SI-	ZIP				J	
TITLÉ	D	DELETE	2.1 111	l.f				Change	Addition	
NAME	Jenkins, ellis w		2.2 NA	ME	ļ					
STREET ADDRESS	P.O. BOX 2784 N/A		2.3.811	REE1 A	DORESS					
CITY-ST-ZIP	LAKELAND FL 33806			ITY-ST	- ZIP					
TITLE	D	DELETE 311		LE				☐ Change	☐ Addition	
NAME	LATONA, RICHARD J		3.2 NA	JMI	ŀ					
STREET ADDRESS			3.3 STI	REFTA	DDRESS					
CITY-ST-ZIP	LAKELAND FL 33806	——————————————————————————————————————	3 4 C		- ZIP					
TITLE		LJ DELETE	4.1 111					Change	Addition	
NAME			4. 2 N/							
STREET ADDRESS					DDRESS					
CITY-ST-ZIP		T WELLET C		IY- \$1	- ZIP					
TITLE		☐ DELETE		5.1 1171.6				Change	L Addition	
NAME			5.2 NA							
STREET ADDRESS					DORESS					
CITY-ST-ZIP		DLLETE	5.4 CIT		- ZIP			Change	Addition	
TITLE		U VALETE	G.1 117					L. Change	L POOITION	
NAME			6.2 NA		Donese					
STREET ADDRESS			6.3 STREET ADDRESS 6.4 City-St-Zip							
CITY-ST-ZIP			6.4 CI1	IY- \$1-	-ZIP					

14. I do hereby certify that the information supplied with this bling 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

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