

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

1996 MAR 27 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000067839 (7)

1. Corporation Name

HERITAGE PARTNERS GROUP XXIV, INC.

Principal Place of Business

101 GEORGE KING BLVD.
SUITE 4
CAPE CANAVERAL FL 32920

Mailing Address

101 GEORGE KING BLVD.
SUITE 4
CAPE CANAVERAL FL 32920

2. Principal Place of Business

21 450 Challenger Road
Suite, Apt. #, etc.

22

23 City & State
Cape Canaveral, FL

24 Zip
32920

25 Country
USA

2a. Mailing Address

26 450 Challenger Road
Suite, Apt. #, etc.

27

28 City & State
Cape Canaveral, FL

29 Zip
32920

30 Country
USA

9. Name and Address of Current Registered Agent

MCPHILLIPS, JACQUELINE
101 GEORGE KING BLVD.
SUITE 4
CAPE CANAVERAL FL 32920

3. Date Incorporated or Qualified

09/01/1995

3a. Date of Last Report

4. FEI Number

59-3332635

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

10. Name and Address of New Registered Agent

81 Name Gregory A. Popp, Esq.

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

83

84 City
Cape Canaveral

FL

85 Zip Code
32920

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 officer 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 not applicable

(NOTE: Registered agent signature required when reappointing)

3/26/96

12. NAME AND ADDRESS OF OFFICERS AND DIRECTORS

TITLE D
NAME MCPHILLIPS, JACQUELINE
STREET ADDRESS 101 GEORGE KING BLVD. SUITE 4
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS 450 Challenger Road
14 CITY-ST-ZIP Cape Canaveral, FL 32920

21 TITLE VP
22 NAME Hartman, Michael A.
23 STREET ADDRESS 450 Challenger Road
24 CITY-ST-ZIP Cape Canaveral, FL 32920

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Michael A. Hartman, V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/96

407.799.4090

Date

Daytime Phone #

CR2E034 (12/95)

1650
32720