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

PROFIT CORPORATION ANNUAL REPORT



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

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DOCLIMENT # DOSOOOOS (Q)

Corporation Name	F93000003932 (6)	
HEADLONG PRODU	ICTIONS, INC.	



Principal Place of Business	Mailing Address
1406 KNIGHTS GRIFFIN RD.	1406 KNIGHTS GRIFFIN RD.
PLANT CITY FL 33565	Plant City Fl 33565

							3. Date Incorporated or Qualified	3a. Date of La	
							11/07/1995	N	A
2.	Principal Place of Busin	ness	2a.	Mailing Address			4. FEI Number		Applied For
21			26				<u>59-33445</u>	31	Not Applicable
22	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional Fee Required
23	City & State		28	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be added to Fees
24	Zιρ	Country 25	29	Zip	Country 30		8. This corporation has liability for it Florida Statutes Yes	_#	ers 199.032,
	9. Nam	e and Address of Cu	rrent Regis	tered Agent			10. Name and Address of New Ro	gistered Agent	
					81	Name			
MORTON, KEN 1406 KNIGHTS GRIFFIN RD.			82	82 Street Address (P.O. Box Number is Not Acceptable)					
	PLANT CITY FL 33	3565			83				
					84	City		FL B5	Zip Code
11	 Pursuant to the provis or registered agent, o 	sions of Sections 607.0 ir both, in the State of I	0502 and 60 Iorida. Such	7.1508, Florida Statutes i change was authorized	s, the above r d by the corp	amed corpo oration's boa	ration submits this statement for the purp and of directors. I hereby accept the appo	ose of changing intment as regist	its registered office ered agent. I am

familiar with, and accept the obligations of Section 607 0505. Horida Statutes

	Styrickine, typoid or printed name of registered agent and title		ITE Registered Agent signature required	
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIELE	P	DELETE	1 1 TITLE	☐ Change ☐ Additi
NAM?	MORTON, KEN		1.2 NAME	
STREET ADDRESS	1406 KNIGHTS GRIFFIN RD.		1 3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY FL 33565		14 CITY - ST - ZIP	
Tille	V	□ DELETE	2 1 1 ITLE	☐ Change ☐ Additi
NAME	Jerkins, John		22 NAME	
STREET ADDRESS	1406 KNIGHTS GRIFFIN RD.		2.3 STREET ADDRESS	
CHY ST ZIP	PLANT CITY FL 33565		24 CITY-ST-ZIP	
Wife	T	☐ DELETE	3 1 TITLE	☐ Change ☐ Addili
NAME	BOONE, CHARLIE		3.2 NAME	
STHEE! ADDRESS	1406 KNIGHTS GRIFFIN RD.		3.3 STREET ADDRESS	
CI3Y+S1-ZIP	PLANT CITY FL 33565		3.4 CiTY - ST - ZiP	
THILE	8	XX) DELETE		☐ Change ☐ Additi
N-1ME	ROESER, JEFF	`	4.2 NAME	
STREET ADDRESS	1406 KNIGHTS GRIFFIN RD.		4 3 STREET ADDRESS	
CITY - ST - ZIP	PLANT CITY FL 33565		4.4 CITY - ST - ZIP	
THEF		DELETE	5 1 TITLE	☐ Change ☐ Additi
NAME			5.2 NAME	
STREE! ADDRESS			5.3 STREET ADDRESS	
CITY - S1 - ZIP			5 4 C+1Y - S1 - ZIP	
TOLE	·	☐ DELFTE	6 1 TiTLE	☐ Change ☐ Additi
NAME			6.2 NAME	¥ \$441
STHEET ACIDRESS			6.3 STREET ADDRESS	
City - St - ZiP			6.4 CiTY - ST - 7IP	

14. Ido 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 eath; 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 13 if changed, or on an attachment with an address.

7 Mar 96 813 754 5770

CR2E034 (12/95)