

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

FILED
Apr 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000015918 (1)

1. Corporation Name
HART RIVER COMPANY

Principal Place of Business
537 EAST PARK AVENUE
TALLAHASSEE FL 32301

Mailing Address
537 EAST PARK AVENUE
TALLAHASSEE FL 32301-2524



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/21/1996	3a. Date of Last Report
21 342 Green Dolphin Dr	26 342 Green Dolphin Dr	4. FEI Number 59-3365180		Applied For Not Applicable	
22 Suite, Apt. #, etc. Cape Haze,	27 Suite, Apt. #, etc. Cape Haze	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 City & State Florida	28 City & State Florida	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Zip 33946	25 Country USA	29 Zip 33946	30 Country USA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

UNDERWOOD, ROBERT L
CARL A. BEDRTOCH
537 EAST PARK AVENUE
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 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

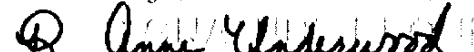
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☒ Addition
NAME		1.2 NAME	D. Anne Underwood
STREET ADDRESS		1.3 STREET ADDRESS	342 Green Dolphin Drive
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Cape Haze, FL 33946
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME		2.2 NAME	Heather Underwood
STREET ADDRESS		2.3 STREET ADDRESS	592 Little River Loop #207
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Altamonte Springs, FL 32714
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby 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:  D. ANNE UNDERWOOD 3/28/97 (41)697-7516

CR2E034 (9/96)