## ·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 # P96000023797 (9)

HDC ENTERPRISES, INC.

FILED
May 01 1998 8:00am
Secretary of State



Principal Place of Business		Mailing Address			
2432 EAST SEMINOLE BLVD APOPKA FL 32703		POST OFFICE BOX 15110 DAYTONA BEACH FL 32115			
U\$				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				03/15/1996	
2. Principal Pla	ace of Business	2a. Mailing Address		4 FEI Number	Applied For
21		26		59-3367072	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		3, COMMODIC OF STATE	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	- <del></del>	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	<ol> <li>This corporation owes or has paid the c</li> </ol>	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	t Registered Agent		10. Name and Address of New Registered	d Agent
ROST, SCOTT R					
444 SEABREEZE BLVD., SUITE 800			82 Street	Address (P.O. Box Number is Not Acceptable)	
DAYTONA BEACH FL 32118				28 Park Ave. N., Suit	e B
			83		
			84 City		85 Zip Code
			Par City	Vince Ruk Fl	L 85 Zip Code
11, Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Statul	tes, the above-named	corporation submits this statement for the purpose	of changing its registered
office or re	gistered agent, or both, in the State of familiar with, and accept the oblig	<del>tof</del> Florida, Such change was i	authorized by the cor:	poration's board of directors. I hereby accept the ap	opointment as registered
~	The village and provide the consignation		rest	1. 20	1 Gac.
SIGNATURE	Bounde, typed or printed name of registered ago		II. Registered Agent signature	e required when reinstating) DATE	,
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	EDWARDS, HOWARD KEAY		1.2 NAME		
STREET ADDRESS	2827 BALLARD AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32833-4037		1.4 CITY - ST - ZIP		
TITLE		DELET <b>e</b>	2.1 TITLE		Change Addition
NAME		4	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 THILE		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		<del>-</del>	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
		Dittile			
NAME CTOTET ADDOCCO			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		İ
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		L) DECEIE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	* :		6 4 CITY-ST-ZIP	110 07/07/0	and the state of t
14. I hereby ce indicated r	erury that the information supplied w on this arinual report or supplements	in this tiling does not qualify f al annual report is true and acc	or the exemption state purate and that my sid	ed in Section 119.07(3)(i), Florida Statutes. I further of anature shall have the same legal effect as if made i	certify that the information [ under oath; that I am an
officer or d	lirector of the corporation or the rec-	civer or trustee empowered to	execute this report as	s required by Chapter 607, Florida Statutes; and tha	t my name appears in
Block 12 or Block 13 if changed, or on an attachment with an address.					