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FILED
May 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000036147 (2)

1. Corporation Name

HATTENBURG DEVELOPMENT CO. INC.

Principal Place of Business

Mailing Address

331 WINDWARD ISLAND
CLEARWATER FL 34630

331 WINDWARD ISLAND
CLEARWATER FL 34630-2328



2. Principal Place of Business	2a. Mailing Address
21 416 DREW STREET Suite, Apt. #, etc.	26 416 DREW STREET Suite, Apt. #, etc.
22 City & State CLEARWATER, FL	27 City & State CLEARWATER, FL
24 Zip 34615	25 PINELLAS 29 34615 30 PINELLAS

3. Date Incorporated or Qualified 04/25/1996	3a. Date of Last Report N/A
4. FEI Number 59-3376884	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

g. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
VAN WINKLE, MARY E ESQUIRE 3844 BEE RIDGE ROAD SUITE 202 SARASOTA FL 34233		81 Name GARY C HATTENBURG	85 Zip Code 34615
		82 Street Address (P.O. Box Number is Not Acceptable) 416 DREW STREET	
		83	
		84 City CLEARWATER, FL	

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HATTENBURG, GARY C	1.2 NAME	
STREET ADDRESS	331 WINDWARD ISLAND	1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34630	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	PATRICIA HATTENBURG
STREET ADDRESS		2.3 STREET ADDRESS	331 WINDWARD ISLAND
CITY-ST-ZIP		2.4 CITY-ST-ZIP	CLEARWATER, FL 34630
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	DAYNA DEALY
STREET ADDRESS		3.3 STREET ADDRESS	880 MANDALAY AVE C-313
CITY-ST-ZIP		3.4 CITY-ST-ZIP	CLEARWATER, FL 34630
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	RICHARD KERPER
STREET ADDRESS		4.3 STREET ADDRESS	1702 LA FOREST
CITY-ST-ZIP		4.4 CITY-ST-ZIP	SAFETY HARBOR, FL 34695
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: Dayna Dealy Vice-President 4-25-97 (813) 447-2211

CR2E034 (9/96)