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 # 1. Corporation Name P96000064379 (6)

HERON'S WATCH DEVELOPMENT CORPORATION

Principal Place of Business	Mailing Add
5281 E COUNTY HWY 30-A	5281 E COI

FILED Feb 06 1998 8:00am Secretary of State

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Principal Placi	e di busilless	waling Address					
5281 E COUN SANTA ROSA	ITY HWY 30-A BEACH FL 32459	5281 E COUNTY HWY SANTA ROSA BEACH					
					DO NOT WRITE IN TH	HIS SPACE	
					3. Date Incorporated or Qualified		
					08/01/1996		
·	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			59-3391588	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
22		27			U. Command of Change Desired	Fee Re	quired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Ζ φ	Count	ry	8. This corporation owes or has paid the	— · –	- ·
24	25	[29]	30		Personal Property Tax due June 30.		J No.
	9. Name and Address of Curren	it Registered Agent			10. Name and Address of New Registe	red Agent	
CO	ffield, P C		8	Name Co	ffield, P. C.		1
127	' HWY 98 EAST 3-A		8	Street Addr	ress (P.O. Box Number is Not Acceptable)		
DES	STIN FL 32541			1719	South County Highway	7 393	
			8	3			ļ
			8	4 000		les Zio (
			ľ	4 City Santa	Rosa Beach,	-L 85 Zip (Oode 459
11. Pursuant 1	to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	lutes, the abo	ve-named corp	poration submits this statement for the purpos tion's board of directors. I hereby accept the	se of changing its	s registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Horida. Such change wa	is authorized l	by the corporat	tion's board of directors. I hereby accept the	appointment as	registered
•	ni lamiliai with, and accept the obliga	ations of, Section 607.0005,	r iorida statut	35.			
SIGNATURE	Signature, typed or printed name of registered age	ort and title it appropriate (A)	ICILE: Bonistored A	gent Signature requir	red when reinstating) DA		
12.	OFFICERS ANI		I 13.	B	ADDITIONS/CHANGES TO OFFICERS		S IN 12
TITLE	<u>D</u>	DELETE	1.1 TITLE		The second secon	Change	Addition
NAME	HERTWIG, WILLA		1.2 NAMI				;
STREET ADDRESS	5281 E COUNTY HWY 30-A			LADORESS			1
CITY-ST-21P	SANTA ROSA BEACH FL 324	50	1.4 CITY				
TITLE	n	DELETE	2.1 1ITLE			Change	Addition
NAME	JONES, C W		22 NAMI	Į.			
STREET ADDRESS	5281 E COUNTY HWY 30-A			T ADDRESS			
	SANTA ROSA BEACH FL 324	50					
CITY-ST-ZIP TITLE	OAITIA HOOA DEAOTI LE 324	DELETE	2 4 CITY 31 TITLE	- 81-21		Change	Addition
- 1		LJ MICH				Onange	
NAME			3.2 NAME				1
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			3.4. CITY				14430
TITLE		DELETE	4.1 1ITLE			L Change	Addition
NAME			4. 2 NAM	i			
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP		. ,	4.4 CITY -	S1-7IP	The second state of the se		
TITLE		☐ DELETE	; • 5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	1 ADORESS			
CITY-ST-ZIP			5 4 CHY-	S1-ZIP			
TITLE		☐ DELETE	6 1 7 ITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			G.4 CITY-				
O11 1 - O1 - EII			0.4 0111	~: ·"1			J

14. I 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 attainment with an address.