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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000094771 (8)

HESSMAN ENTERPRISES INC.

Principal	Place	of Business

Mailing Address

## FILED Apr 28 1997 8:00am Secretary of State



1222 ROYAL OAK DRIVE DUNEDIN FL 34698		1222 ROYAL OAK DRIVE DUNEDIN FL 34698-3113					
					3. Date incorporated or Qualified 11/15/1996	3a. Date of Last F	report
2. Principal Place of Business		28. Mailing Address		4. FEI Number	A	pplied For	
21 SAME		26 SAME		59-3409559	N/	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22 City & Stat	le	City & State	<del></del>	<del></del>	Election Campaign Financing		equired
23		28 5AMC		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Žip –	Country	Ζιρ	Count 30 Pin	y	8. This corporation has liability for i	nlangible tax under s	3. 199.032,
24	25 PINCILAS	29	30 Dia	cuis		Yes No	
1154	9. Name and Address of Curren	t Registered Agent	8		10. Name and Address of New Re	jistered Agent	
	SSMAN, RICHARD A		°	i Name			
	2 RÖYAL OAK DRIVE NEDIN FL 34698		82 Street Add		ddress (P.O. Box Number is Not Acceptable)		
	120111 2 0 1000		8:	3			
į							
			8-	4 City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Stat	utes, the abo	ve-named c	orporation submits this statement for the paration's board of directors. I hereby accept	urpose of changing i	ts registered
agent. I a	am familiar with, and accept the obligation	ations of, Section 607.0505, I	S authonzed t Florida Statut	ay the corpc as.	nation's board of directors. Thereby accep	и ине арролители аз	regisiered
SIGNATURE							
40	Signature, typed or printed name of registered age		O1E Registered A	gent signature re	oquired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE DIRECTOR	DC IN 12
12. TITLE					PRESIDENT	Change	Addition
NAME			1.1 BTCE 1.2 NAMI		RICHARD A. HESSMAN	)	
STREET ADDRESS				EL ADORESS	1222 ROYAL OAK DR	I ▼	
City-St-ZIP			1.4 CHY		DUNEDIN FL 34691		
TITLE	☐ DELETE 2				VICE PRESIDENT	Change	Addition
NAME			2.2 NAMI		DIANA HESSMAN		
STREET ADDRESS			2.3 STRE	FT ADDRESS	DUNEDIN FL. 3469		
CITY-ST-ZIP			2. 4 CITY	-\$1-ZIP	Dunedin Fl. 34696		
TITLE	☐ DELETE 3.11					Change	Addition
NAME			3.2 NAMI				
STREET ADDRESS			3.3 STRE	F1 ADDRESS			
CITY-ST-ZIP		DELETE	3.4 CITY			Chacan	Addition
TITLE		☐ vereie	4.1 1111.6			<u></u> Change	T Montion
NAME ATOREX ADDRESS			4. 2 NAM	E1 ADDRESS			
STREET ADDRESS			4.3 STRE 4.4 City				
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE			☐ Change	Addition
NAME	528						
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		DELETE	6.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			6.2 NAM	<u> </u>			
STREET ADDRESS			6 3 S1RE	ET ADDRESS			
CITY-ST-ZIP			6.4 CITY	· ST · ZIP			
44 (3)		1 241 41 4 791			to the Continue Add ONIOVE Florida Deat to	and the state of the state of	

1. 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 ochanged, or on an attachment with an address.