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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STA

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

Apr 30 1997 8:00am

Secretary of State

## DOCUMENT # P96000098547 (8)

HEIDI GARDNER SUPPORT COORDINATION SERVICES, INC

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Principal Plac	e of Busines	lailing Addres	g Address					1 1007100					(8)8) 8)))) 3)(	11 1881	1891		
10150 BELLE RIVE BLVD.				10150 BELLE RIVE BLVD.													
APT 1308 JACKSONVILLE FL 32256				APT 1308 Jacksonville FL 32256-9591													
									-	3. Date Incorporated or Qualific					ed 3a. Date of Last Report		
										12/02/	1996	ted of Qu	ailleo	3a. D	ate or Last	неро	rı.
2. Principal Place of Business				2a. Mailing Address					4.	4. FEI Number 11399						Applie	d For
21				26						<i>o</i> 5-	Ut.	1137	)			Vot Ap	oplicable
Suite, Apt. #, etc.				Suite, Apt. #	, etc.				5.	Certifica	ate of Si	atus Des	ired		\$8.75		
22				City & Cityle											Fee	Requi	red
City & State				City & State					6.	6. Election Campaign Financing \$5.00 May Be						,	
Zip Country							nuntru.					tribution			Adde		
_	├ <b>-</b> ¬ `` ′			F-7 - F1			Country								tax under	s. 19	9.032,
24	25 9, Name and Address of Current			[29] [30] Registered Agent						Florida Statutes Yes No  10, Name and Address of New Registered Agent							
GAD	DNER, HE		TOTAL TIOSIS	storou Agont		81	I 1	Name	10.	Haile &	inu Au	11699 OLI	YEW NO	Aisteren	Agent		
10150 BELLE RIVW BLVD. APT. 1308 JACKSONVILLE FL 32256						82	1	Street Ad	dress (P	ss (P.O. Box Number is Not Acceptable)							
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11. Pursuant office or r	to the provis egistered a m familiar w	sions of Sections 607, gent, or both, in the S vith, and accept the o	.0502 and 6 tate of Flori bligations o	507.1508, Flori ida. Such char of, Section 607	da Statutes, the nge was authori .0505, Florida S	above zed by statute:	e-n y th s.	named co ne corpor	rporatio ation's b	n submit loard of	s this st director	alement f s. I hereb	or the p		f changing pointment a	its re is reg	gistered istered
SIGNATURE																	
12,	Signature, type	d or printed name of registore	AND DIRE		(NO1E Regist	. <u> </u>	oct :	signature req				NICEO TO	2 0000	DATE	DIDECTO	NDC IN	1-10
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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.