

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

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P97000021653 (5)**

1. Corporation Name

HEIDI TYLINE KING, INC.



Principal Place of Business 10040 COLLINS HOLE ROAD TALLAHASSEE FL 32312	Mailing Address 10040 COLLINS HOLE ROAD TALLAHASSEE FL 32312
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 SAME		2a. Mailing Address 26 _____		3. Date Incorporated or Qualified 03/10/1997	
Suite, Apt. #, etc. 22 _____		Suite, Apt. #, etc. 27 _____		4. FEI Number 59-343-3769	
City & State 23 _____		City & State 28 _____		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 _____		Country 25 _____		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country 29 _____		Zip 30 _____		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**KING, HEIDI TYLINE
10040 COLLINS HOLE ROAD
TALLAHASSEE FL 32312**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 _____
84 City FL 85 Zip Code

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

Heidi Tyline King

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	11 TITLE	Heidi Tyline King
NAME	Heidi Tyline King	12 NAME	Heidi Tyline King
STREET ADDRESS	10040 Collins Hole Road	13 STREET ADDRESS	10040 Collins Hole Road
CITY-ST-ZIP	Tallahassee FL 32312	14 CITY-ST-ZIP	Tallahassee FL 32312
TITLE	_____	2.1 TITLE	_____
NAME	_____	2.2 NAME	_____
STREET ADDRESS	_____	2.3 STREET ADDRESS	_____
CITY-ST-ZIP	_____	2.4 CITY-ST-ZIP	_____
TITLE	_____	3.1 TITLE	_____
NAME	_____	3.2 NAME	_____
STREET ADDRESS	_____	3.3 STREET ADDRESS	_____
CITY-ST-ZIP	_____	3.4 CITY-ST-ZIP	_____
TITLE	_____	4.1 TITLE	_____
NAME	_____	4.2 NAME	_____
STREET ADDRESS	_____	4.3 STREET ADDRESS	_____
CITY-ST-ZIP	_____	4.4 CITY-ST-ZIP	_____
TITLE	_____	5.1 TITLE	_____
NAME	_____	5.2 NAME	_____
STREET ADDRESS	_____	5.3 STREET ADDRESS	_____
CITY-ST-ZIP	_____	5.4 CITY-ST-ZIP	_____
TITLE	_____	6.1 TITLE	_____
NAME	_____	6.2 NAME	_____
STREET ADDRESS	_____	6.3 STREET ADDRESS	_____
CITY-ST-ZIP	_____	6.4 CITY-ST-ZIP	_____

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 attachment with an address.

SIGNATURE

Heidi Tyline King

1/28/98

850-668-85525

CR2E034 (10/97)