

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2001 8:00 am
Secretary of State

04-18-2001 90107 031 ***150.00

DOCUMENT # P97000046044

1. Entity Name
BLUE HERON INVESTIGATIONS INC.

Principal Place of Business

**221 W VENICE AVE
 VENICE FL 34285
 US**

Mailing Address

**P.O. BOX 1181
 VENICE FL 34284
 US**

2. Principal Place of Business

303 S. Tamiami Trail

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Nokomis, FL

City & State

4. FEI Number

65-0319635

Applied For

Not Applicable

Zip

34275

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROSSOW, VLADIMIR W.
 221 W VENICE AVE
 VENICE FL 34285**

Name

Dorothy M. Rossow

Street Address (P.O. Box Number is Not Acceptable)

303 S. Tamiami Trail

City

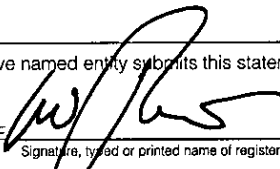
Nokomis

FL

Zip Code

34275

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE  **VLADIMIR W. ROSSOW**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-12-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	ROSSOW, VLADIMIR W	221 W VENICE AVE	VENICE FL 34285	<input type="checkbox"/>
VP	ROSSOW, DOROTHY M.	221 W VENICE AVE	VENICE FL 34285	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	Rossow, Dorothy M	303 S. Tamiami Trail	Nokomis, FL 34275	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP	Rossow, Vladimir W.	303 S. Tamiami Trail	Nokomis, FL 34275	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **VLADIMIR W. ROSSOW (VP)** **4-12-01** **941-486-7386**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)



DO NOT WRITE IN THIS SPACE