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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secret iry of State DIVISION OF CORPORATIONS

## **FILED** Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90135 048 \*\*\*150.00

## DOCUMENT # P98000031792

HEARTLAND CONSTRUCTION, INC.

Prin	cipal	Place	of Business
		83RD	TERRACE

Mailing Address

5425 S.W. 83RD TERRACE



GAINESVILLE FL 32608 GAINESVILLE FL 32608 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/06/1998 Apr lied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 28 23 Country Zip Cour try Zip 8. This corporation owes the current year intangible 30 Persor al Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent TOST, GARY Street Acdress (P.O. Box Number is Not Acceptable) 5425 S.W. 83RD TERRACE GAINESVILLE FL 32608 83 85 Zip Code 84 City

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named or reportation submits this statement for the purpose of changing its registered

	n familiar with, and a	cept the obligati	ons of, Section 60	07.0505, Florida	a Statutes.				j
SIGNATUFE	Signature, typed or printed na	ne of registered agent	and title if applicable.	(NOT ∄ Re	gistered Agent signature red				
12.		OFFICERS ANI	DIRECTORS		13.	ADDITIO	INS/CHANGES TO OFFICERS		
TITLE	PVST			DELETE	1.1 TITLE			Change	Addition
NAME	TOST, GARY				1.2 NAME				
STREET ADDRESS	5425 S.W. 83RD	TERRACE			1.3 STREET ADDRESS				
CITY-ST-ZIP	GAINESVILLE FL	32608			1.4 CITY-ST-ZIP				
TITLE	D			DELETE	2.1 TITLE			Change	Addition
NAME	TOST, GARY				2.2 NAME				
STREET ADDRESS	5425 S.W. 83RD	TERRACE			2.3 STREET ADDRESS				
CITY-ST-ZIP	GAINESVILLE FL	32608			2.4 CITY-ST-ZIP				
TITLE	•			DELETE	3.1 TITLE			Change	Addition
NAME					3.2 NAME				
STREET ADDRESS					3.3 STREET ADDRESS				
CFTY-ST-ZIP					3.4, CITY-ST-ZIP			· <del></del> -	
TITLE				DELETE	4.1 TITLE			Change	☐ Addition
NAME					4. 2 NAME				
STREET ADDRE 3S					4.3 STREET ADDRESS				
CITY-ST-ZIP					4.4 CITY-ST-ZIP	_			
TITLE				) DELETE	51 TITLE			Change	Addition
NAME					5.2 NAME				
STREET ADDRESS					5.3 STREET ADDRESS				
CITY-ST-ZIP					5.4 CITY-ST-ZIP			·	
TITLE				] DELETE	6.1 TITLE			Change	Addition
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(2)(1), 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR