FILE NOW: FILING FEE AFTER MÂY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

HEARTHSTONE BUILDERS, INC.

Principal Place of Business Mailing Address P O BOX 1027 1415 SUGH BLVD. ORLANDO FL 32806 WINTER PARL FL 32790-1027 3. Date Incorporated or Qualified 3a. Date of Last Report 04/08/1991 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 59-3059052 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Oountry 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No.

10. Name and Address of New Registered Agent 24 25 30 29 9. Name and Address of Current Registered Agent 81 Name MARTIN, JOHN FOSTER 1011 LAKE DAVIS DRIVE Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32806 83 Zip Code 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NCT). Registured Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change TITLE ___ Addition 1.1 1000 MARTIN. RANDOLPH G. NAME 1.2 NAME 1011 LAKE DAVIS DR. 1.8 STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1 # CITY - ST - ZIP DELETE 2. LTOLE Change Addition TITLE NAME MARTIN, MONICA M. 2.2 NAME 1011 LAKE DAVIS DR. STREET ADDRESS 2.8 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 2.4 CITY-S1-ZIP DELETE Addition Change TITLE 3.1 THLE MARTIN, JOHN FOSTER NAME 3.2 NAME 1011 LAKE DAVIS DR. STREET ADDRESS 3.8 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 3.4. CITY- \$1-ZIP Change DELETE Addition 4.1 HILE TITLE NAME 4. 2 NAME STREET ADDRESS 4.8 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 5.4 TITLE NAME 5.2 NAME **5.B STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ■ Addition TITLE 6.4 THE NAME 6.P NAME STREET ADDRESS 6.B STREET ADDRESS

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). Fiorida 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 logal effect as if made under oath; that I am an officer or director of the corporation of 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, do on an attachment with an address.

6.4 CITY - ST - ZIP

CITY-ST-ZIP

FILED

May 08 1997 8:00am

Secretary of State