

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S98639

(5)

1. Corporation Name

HERITAGE BAY CORPORATION

Principal Place of Business

~~4000 E HIGHWAY 98~~
SUITE 10
DESTIN FL 32541

Mailing Address

~~4000 E HIGHWAY 98~~
SUITE 10
DESTIN FL 32541

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/06/1991

3a. Date of Last Report
06/02/1994

4. FEI Number
59-3087768

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 2075 OLD HIGHWAY 98
Suite, Apt. #, etc.

2a. Mailing Address

26 POST OFFICE BOX 6220
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FONTAINE, GEORGE T.
807 INDIAN TRAIL
DESTIN FL 32541

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

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

NAME

CIMMINO, PETER R.

STREET ADDRESS

4000 E HIGHWAY 98 #10-

CITY - ST - ZIP

DESTIN FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2075 OLD HIGHWAY 98, #10

TITLE

VST

NAME

FONTAINE, GEORGE

STREET ADDRESS

4000 E HIGHWAY 98 #10-

CITY - ST - ZIP

DESTIN FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3853 Indian Trail

2075 OLD HIGHWAY 98, #10

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included in this 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 a shareholder 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, on an annual report with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

1/11/95

904-837-7020