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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V07278

(7)

Mailing Address

HERITAGE MOVING & STORAGE INC.

F	ILED	l
May 01	1997	8:00am
Secret	ary of	State

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4/25/97

904-423-1500

545 B AIR PARI EDGEWATER FL		545 B AIR PARK ROAD EDGEWATER FL 32132-3044					
US		US			3. Date Incorporated or Qualified 01/16/1992	3a. Date of Last I	Report
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		pplied For
21		26			59-3116148	N.	lot Applicable
State, Apt 22	#, elc	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & State 23	С	City & State			Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Ζιρ 24	Country 25	Zip 3	Country		8. This corporation has liability for in Florida Statutes	ntangible tax under : Yes	s. 199.032,
	9, Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	jistered Agent	
DEL/	AHANTY, EDWARD J.		61 Na	me			
545 (B AIR PARK ROAD		B2 Str	eet Addre	ess (P.O. Box Number is Not Acceptable	(4)	
EDG	EWATER FL 32132			ooi maane			
			63				
			84 Cit	у		85 Zip	Code
						FL ° 2 °	
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obliq	e of Florida. Such change was au	thorized by the	ned corpo corporation	oration submits this statement for the proofs board of directors. I hereby accep	urpose of changing t the appointment a	its registered s registered
SIGNATURE	Stgrudure, typed or printed name of registored a	cond and title discussionable (NOTE:	Registered Agent sign	ature require	ad whoo reinctation)	DATE	
12.		ND DIRECTORS	13.	idiale iedale	ADDITIONS/CHANGES TO OFFIC		RS IN 12
1.10	DP	DELETE	1.1 TITLE	\neg		Change	
NAME	DELAHANTY, EDWARD J.		1.2 NAME			_ •	
STREET ADORESS	707 FLAGLER AVENUE		1.3 STREET ADDR	-88			
CHY S1-ZIF	EDGEWATER FL		1.4 CITY - ST - ZIP				
TALE	DS	DELETE	2.1 TITLE	_		Change	Addition
NAME	DELAHANTY, MARIE A.		2.2 NAME]			
STREET ADORESS	707 FLAGLER AVENUE		2.3 STREET ADDR	FSS			
City-St ZiF	EDGEWATER FL		2. 4 CITY - ST - ZIP				
TIFEE	D	DELETE	3.1 TITLE			☐ Change	Addition
NAME	LAYSON, DALE F.		3.2 NAME	Ì			Ì
STEEF LADORESS	311 THACKARY ROAD		3.3 STREET ADOR	ESS			
CHY-ST ZIP	ORMOND BEACH FL		3.4. CITY-ST-ZIP				
THIF		DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS:			4.3 STREET ADDR	ESS			
Of5 - S* - 74P			4.4 CiTY-ST-ZiP	1	:		}
TITLE	·	DELETE	5.1 TITLE		1	☐ Change	Addition
NAME			5.2 NAME				
STHEET ADDRESS			5.3 STHEET ADDR	ESS			
C-1Y-S1-ZIP			5.4 CITY-ST-ZIP				
104.6		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDR	ESS			
CHY-ST ZIP			6.4 CITY-ST-ZIP		-		
14. I do herel	by certify that the information suppli on indicated on this annual report or	ed with this filing does not qualify supplemental annual report is tru	tor the exempti se and accurate	on stated and that	in Section 119.07(3)(i), Florida Statutes my signature shall have the same lega	s. I further certify tha I effect as if made u	at the Inder oath; that
Laman o	flicer or director of the corporation in Block 12 or Block 13 if changed,	or the receiver or trustee empowe	red to execute t	his report	t as required by Chapter 607, Florida S	tatutes; and that my	name