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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V12747

(4)

HEAGY ENTERPRISES, INC.

Principal Place of Business

10468 ROOSEVELT BLVD ST PETERSBURG FL 33716 Mailing Address

10468 ROOSEVELT BLVD ST PETERSBURG FL 33716-3816

## FILED May 14 1997 8:00am Secretary of State



US		US		·			
				<ol> <li>Date Incorporated or Qualified 02/13/1992</li> </ol>	02/13/1992 04/30/1996		
2. Principal Place of 21 10 468)		2a. Mailing Address	<b>K</b>		4. FEI Number 59-3106064	Applied Not Ap	d For oplicable
Surte, Apt. #, etc.   Suite, Apt. #, etc.   22   57   PE (En. 5 BOM)   27			Jule		5. Certificate of Status Desired	S8.75 Addit	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Added to Fe	
Zip 24 33716			30	untry		Yes No	9.032,
	lame and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	IZABETH A.			81 Name			
	idpiper cir.			82 Street Address (P.O. Box Number is Not Acceptable)			
CLEARWAT	TER FL 34622			83			
				03			
				84 City		FL 85 Zip Cod	
office or registeri	ed agent, or both, in the State of	of Florida. Such change was	s authoriza	ed by the cor	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its re opt the appointment as regi	gistered istered
agent Lam famil	liar with, and accept the obligat	ions of, Section 607.0505, F	Florida Sta	atutes.		•	
SIGNATURE	typed or printed name of registered agent	and tree if applicable (NI	OTE: Register	ed Agent signature	e required when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		V 12
TITLE P		DELETE	1.1	TITLE		Change [	Addition
	GY, STUART M.		1.21	NAME			
	8 ROOSEVELT BLVD		1.3	STREET ADDRESS			
	ETERSBURG FL		1.41	CITY-ST-ZIP			
TITLE VPS		DELETE	2.1	THTLE		☐ Change	Addition
	gy, elizabeth a.		2.2	NAME			
	68 ROOSEVELT BLVD		23	STREET ADDRESS			
CITY-ST-ZIP ST P	etersburg fl		2 4	CITY-ST-ZIP			
BILE		☐ DELETE		TITLE		Change	Addition
NAME			3.2	NAME			
STREET ADDRESS			3.3	STREET ADDRESS			
CITY - \$1 - 7IF			3.4	CITY-ST-ZIP			
TITLE		DELETE	4.1	TITLE		Change	Addition
NAME			4. 2	NAME			
STREET ADDRESS			4.3	STREET ADDRESS			
CITY - S1 - ZIP			4.4	City-St-Zip			
TITLE		DELETE	5.1	TITLE		☐ Change ☐	Addition
NAME			5.2	NAME			
STREET ADDRESS			5.3	STREET ADDRESS			
CITY - SI - ZIP			5.4	CITY-ST-ZIP			
THE	A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1	DELETE	~~~~~	TITLE		Change L	Addition
NAME			62	NAME			
STREET ADDRESS				STREET ADDRESS			
City - St - Zip			1	CITY-ST-ZIP			
	ity that the information surrelied	with this filing does not ou			stated in Section 119.07(3)(i), Florida Statut	es. I further certify that the	

4. To hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Horida Statutes. Filterine certify into the information indicated on this annual report of 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 Brock 13 if changing, of in an attrichment with an address.

SIGNATURE:

NATURE AND TYPED OR PRINTENNAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #