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

**PROFIT** CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

HEARTLAND TOWING, INC.

Secretary of State

FILED

May 07 1998 8:00am

Principal Place of Business Mailing Address 5311 RAZORBAÇK COURT P.O. BOX 2032 MIDDLEBURG FL 32068 ORANGE PK FL 32067 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/11/1992 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-3120636 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 30 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent tosh, kenneth W. 5311 RAZORBACK COURT 82 Street Address (P.O. Box Number is Not Acceptable) MIDDLEBURG FL 32068 83 City Zip Code 85 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, typed or printed name of registrated agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition OFFICERS AND DIRECTORS 12. 13. TOSK MARCIE D. TITLE 1.1 TITLE TOSH, KENNETH W. 1.2 NAME NAME 5311 BAZORBACK COURT '5751 UVELLA 1.3 STREET ADDRESS STREET ADDRESS 5751 OVEWARD CITY-ST-ZIP DELETE Addition TITLE 2.1 DILE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THILE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or suppliemental 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 attrichment with an address. -28 - 97 904-212-414

6.2 NAME 6.3 STREET ADDRESS

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