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PROFIT CORPORATION ANNUAL REPORT



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

1996

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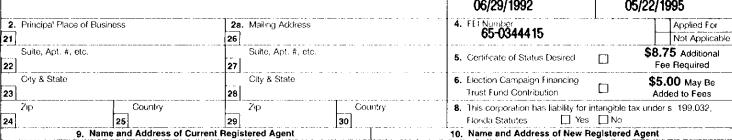
DOCUMENT #

HERITAGE AUTOMOTIVE ENTERPRISES, INC.

Principal Place of Business
2665 CLEVELAND AVENUE
SUITE 108
FT MYERS FL 33901

Mailing Address

2665 CLEVELAND AVENUE SUITE 108 FT MYERS FL 33901



LEGRANDE, J.L. 2069 FIRST STREET SUITE 304 FT MYERS FL 33901

	Florida Statutes Yes No
Ι	10. Name and Address of New Registered Agent
81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named concoration 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. Thereby 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 harne of registered agent and title it ap-	piloatile (NOTE R	logistaced Agant signations	የው መናዎት <mark>የአትኖስ የቀ</mark> ግምችስ ሲያ	DÁTE.	
12.	OFFICERS AND DIRECT	ORS	13.	ADDITIONS/CHANGES TO OFFICE		RS IN 12
THTLE	U	DELÉTE	1.1 THE		Change	☐ Addition
NAME	STEWART, SUE C.		1.2 NAME	Stewart Suc Can	•	
STREET ADDRESS	748 PONDELLA RD #E226		1.3 STREET ADDRESS	Stewart Suc Chus.	108	
CITY - S1 - ZIP	N FT MYERS FL		1.4 CHY-ST-7(P	FC. Myses PL. 33901		
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STREET ADDRESS			3.3 STREET ADDRESS			
CHY-ST-ZP			3.4 City - ST-7if	l ,	. , ,	. , . ,
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CITY - ST - ZIP			5.4 CHY+S1-ZIF			
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NAME .			6.2 NAME			
STREEL ADDRESS			6.3 STREET ADDRESS			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that triy 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 chapter 6, or on an attachment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/96

941-334-4157 Daytono Phoine M

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