

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 1:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F78557 (8)

1. Corporation Name
HEINER'S CONSTRUCTION CO.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
**305 PAPRIKA CT 305 PAPRIKA CT
RALEIGH NC 27614 RALEIGH NC 27614
US US**

3. Date Incorporated or Qualified **05/03/1982** 3a. Date of Last Report **05/01/1984**

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. **26** Suite, Apt. #, etc.

4. FEI Number **59-2378884** Applied For
Not Applicable

22 City & State **27** City & State

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

23 Zip **28** Country

6. Election Campaign Financing
Trust Fund Contribution **\$5.00 May Be
Added to Fees**

24 Zip **25** Country **29** Zip **30** Country

6. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HEINER EDWARD J
3900 MT VERNON AV
TITUSVILLE FL 32780**

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **B5** Zip Code **FL**

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 reconstituting)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	VP
NAME	HEINER, LINDA
STREET ADDRESS	305 PAPRIKA CT
CITY - ST - ZIP	RALEIGH NC
TITLE	P
NAME	HEINER, MICHAEL
STREET ADDRESS	305 PAPRIKA CT
CITY - ST - ZIP	RALEIGH NC
TITLE	S
NAME	HEINER, EDWARD
STREET ADDRESS	3900 MT VERNON AVE
CITY - ST - ZIP	TITUSVILLE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 19.07(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 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Edward J. Heiner **EDWARD J. HEINER** 4/26/95 407-248-8804

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR