2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# 340484

Entity Name: HEIDT & ASSOCIATES, INC.

Current Principal Place of Business:

1602 N. 15TH STREET
TAMPA, FL 336055046

New Principal Place of Business:

Current Mailing Address:

1602 N. 15TH STREET
TAMPA, FL 336055046

New Mailing Address:

FEI Number: 59-1226124 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VTD ( ) Delete
Name: DILLION, ROBERT L
Address: 2983 W KNIGHTS AV
City-St-Zip: TAMPA, FL 33611

Title: VD ( ) Delete
Name: PLATE, TIMOTHY M
Address: 16024 GLEN HAVEN DR
City-St-Zip: TAMPA, FL 336181649

Title: VD ( ) Delete
Name: GASSAWAY, PATRICK B
Address: 17203 KARIS CT.
City-St-Zip: TAMPA, FL 336472605

Title: PSD ( ) Delete
Name: HALL, TOXEY A
Address: 371 CHANNELSIDE WALK WAY, UN. 1801
City-St-Zip: TAMPA, FL 33602

Title: SD ( ) Delete
Name: ROUTT, JOAN J. (ASS'T)
Address: 17123 MOCKINGBIRD LN
City-St-Zip: LUTZ, FL 33548

Title: CEOD ( ) Delete
Name: BAHLKE, WILLIAM P.
Address: 1000 S HARBOUR ISLAND BLVD UNIT 2607
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VTD (X) Change ( ) Addition
Name: DILLION, ROBERT L
Address: 17123 MOCKINGBIRD LN
City-St-Zip: LUTZ, FL 33548

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT L DILLION VTD 04/06/2009

Electronic Signature of Signing Officer or Director — Date