

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000088564

**FILED**  
**Jan 14, 2016**  
**Secretary of State**  
**CC9880640101**

**Entity Name:** HEYER TAX & ASSOCIATES, INC.

**Current Principal Place of Business:**

8569 PINES BLVD,  
STE 216  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

8569 PINES BLVD,  
STE 216  
PEMBROKE PINES, FL 33024 US

**FEI Number:** 45-3596076

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HEYER, DEBRA A  
8569 PINES BLVD  
214  
PEMBROKE PINES, FL 33024 US

*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

**Officer/Director Detail :**

Title           VP  
Name           KYLE, JAMA M  
Address        8569 PINES BLVD,  
                  STE 216  
City-State-Zip:   PEMBROKE PINES FL 33024

Title           P  
Name           HEYER, DEBRA A  
Address        8569 PINES BLVD,  
                  STE 216  
City-State-Zip:   PEMBROKE PINES FL 33024

Title           CFO  
Name           HEYER, RICHARD EJ  
Address        8569 PINES BLVD,  
                  STE 216  
City-State-Zip:   PEMBROKE PINES FL 33024

*I hereby 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 all other like empowered.*

**SIGNATURE:** DEBRA A HEYER

**PRESIDENT**

**01/14/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date