


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # 429857 1. Entity Name HEFFNER SERVICE COMPANY	
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Principal Place of Business 37 NE 1ST TERRACE SUITE D DEERFIELD BEACH, FL 33441 US	Mailing Address 37 NE 1ST TERRACE SUITE D DEERFIELD BEACH, FL 33441 US
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1469127	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HURLEY, BARBARA W
180 NW 47TH AVE.
DEERFIELD BEACH, FL 33442**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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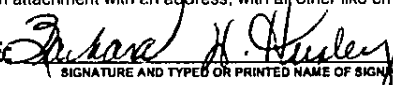
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAWSON, STEPHEN M. 115 ST. CLOUD LANE BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HURLEY, BARBARA W 180 NW 47TH AVENUE DEERFIELD BCH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HURLEY, JERIMIAH 180 NW 47TH AVE. DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, RICHARD C 2291 LITTLE BROOKE LANE DUNWOODY, GA 30338
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, MARY ANN 2291 LITTLE BROOKE LANE DUNWOODY, GA 30338
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/24/07-80010-001 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

4-10-07 954-427-1200
Date Daytime Phone #