

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 516446

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** HEAVENER INVESTMENT SERVICES, INC.

**Current Principal Place of Business:**

2602 UNIVERSITY BLVD. W  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

**Current Mailing Address:**

2602 UNIVERSITY BLVD. W  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

**FEI Number:** 59-1783755

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEAVENER, JR, MAC D  
5446 RIVER TRAIL RD. N  
JACKSONVILLE, FL 32277 US

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

HEAVENER, JR, MAC D  
1172 EMILYS WALK LANE WEST  
JACKSONVILLE, FL 32221 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:**

04/22/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MAC D. HEAVENER JR.  
Address: 5446 RIVER TRAIL RD N  
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD ( ) Delete  
Name: HEAVENER, ANN  
Address: 5446 RIVER TRAIL RD N  
City-St-Zip: JACKSONVILLE, FL 32277

Title: D ( ) Delete  
Name: HEAVENER, MICHAEL D  
Address: 5446 RIVER TRAIL ROAD, NORTH  
City-St-Zip: JACKSONVILLE, FL 32277

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MAC D. HEAVENER JR.  
Address: 1172 EMILYS WALK LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32221

Title: SD (X) Change ( ) Addition  
Name: HEAVENER, ANN  
Address: 1172 EMILYS WALK LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D (X) Change ( ) Addition  
Name: HEAVENER, MICHAEL D  
Address: 5970 OTTER CREEK COURT  
City-St-Zip: JACKSONVILLE, FL 32221

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:** MAC D. HEAVENER, JR.

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date