

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F85433

FILED
Jan 05, 2009
Secretary of State

Entity Name: PRINTING BY HEARN, INC.

Current Principal Place of Business:

% WILLIAM H HEARN
5051 TOZOUR ROAD
FT PIERCE, FL 34946

New Principal Place of Business:

Current Mailing Address:

% WILLIAM H HEARN
5051 TOZOUR ROAD
FT PIERCE, FL 34946

New Mailing Address:

FEI Number: 59-2217046 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEARN, WILLIAM H
5051 TOZOUR ROAD
FT PIERCE, FL 34946 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: VD () Delete
Name: DEBORAH, SHANNON D
Address: 5051 TOZOUR ROAD
City-St-Zip: FT. PIERCE, FL 34946

Title: PD () Delete
Name: HEARN, WILLIAM H,
Address: 5051 TOZOUR ROAD
City-St-Zip: FT. PIERCE, FL 34946

Title: STD () Delete
Name: HEARN, JEANNE,
Address: 5051 TOZOUR ROAD
City-St-Zip: FT. PIERCE, FL 34946

Title: VD () Delete
Name: HEARN, EDWARD J,
Address: 5051 TOZOUR ROAD
City-St-Zip: FT. PIERCE, FL 34946

Title: VD () Delete
Name: HEARN, THOMAS HENRY,
Address: 5051 TOZOUR ROAD
City-St-Zip: FT. PIERCE, FL 34946

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JEANNE HEARN

STD

01/05/2009

Electronic Signature of Signing Officer or Director

_____ Date