

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J13406

FILED
Jan 07, 2009
Secretary of State

Entity Name: JOHN CHARLES HEEKIN, P.A.

Current Principal Place of Business:

% JOHN CHARLES HEEKIN
21202 OLEAN BLVD. #C-2
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

% JOHN CHARLES HEEKIN
21202 OLEAN BLVD. #C-2
PORT CHARLOTTE, FL 33952 US

Current Mailing Address:

% JOHN CHARLES HEEKIN
PO BOX 494307
PORT CHARLOTTE, FL 33949

New Mailing Address:

% JOHN CHARLES HEEKIN
PO BOX 494307
PORT CHARLOTTE, FL 33949 US

FEI Number: 59-2667057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEEKIN, JOHN CHARLES
21202 OLEAN BLVD.
SUITE C-2
PT. CHARLOTTE, FL 33952 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: PD () Delete
Name: HEEKIN, JOHN CHARLES,
Address: 21202 OLEAN BLVD. #C-2
City-St-Zip: PT. CHARLOTTE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HEEKIN, JOHN CHARLES,
Address: 21202 OLEAN BLVD. #C-2
City-St-Zip: PT. CHARLOTTE, FL 33952 US

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: JOHN CHARLES HEEKIN

PD

01/07/2009

Electronic Signature of Signing Officer or Director

Date