

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K53990

FILED
Jan 16, 2009
Secretary of State

Entity Name: HEINZ BROTHERS OUTDOOR SERVICES, INC.

Current Principal Place of Business:

4140 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

4140 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-2922630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEINZ, THOMAS LEE
4140 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

HEINZ, THOMAS LEE
4140 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32309 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:

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HEINZ, THOMAS LEE,
Address: 1454 LLOYDS COVE RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: TS () Delete
Name: HEINZ, MARY THERESA,
Address: 1454 LLOYDS COVE RD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: THOMAS L. HEINZ

DP

01/16/2009

Electronic Signature of Signing Officer or Director

Date