

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L77978

FILED
Apr 13, 2006
Secretary of State

Entity Name: LAW OFFICES OF HEIST, WEISSE AND LUCREZI, P.A.

Current Principal Place of Business:

C/O HARRY ANTHONY HEIST
PO BOX 2514
FT MYERS BEACH, FL 33932

New Principal Place of Business:

Current Mailing Address:

C/O HARRY ANTHONY HEIST
PO BOX 2514
FT MYERS BEACH, FL 33932

New Mailing Address:

FEI Number: 65-0215696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEIST, HARRY ANTHONY
1661 ESTERO BLVD.
FORT MYERS BEACH, FL 33931 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: PSD () Delete
Name: HEIST, HARRY ANTHONY,
Address: 1661 ESTERO BLVD.
City-St-Zip: FT.MYERS BEACH, FL 33931 US

Title: VPT () Delete
Name: DAVID ROBERT WEISSE,
Address: 1661 ESTERO BLVD
City-St-Zip: FT. MYERS BCH, FL 33931 US

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 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: HARRY ANTHONY HEIST

PSD

04/13/2006

Electronic Signature of Signing Officer or Director

Date