

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M24354

FILED
Jan 05, 2009
Secretary of State

Entity Name: HERITAGE FOREST PRODUCTS, INC.

Current Principal Place of Business:

1990 INDUSTRIAL DR
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

PO BOX 2460
DELAND, FL 32721

New Mailing Address:

FEI Number: 59-2618273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HRAWG CORP
1801 N MILITARY TRAIL
STE 200
BOCA RATON, FL 33431 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: MEYER, DONALD L.,
Address: 4002 LEGION DRIVE
City-St-Zip: HAMBURG, NY

Title: STD () Delete
Name: EICHLER, DONALD A.,
Address: 4002 LEGION DRIVE
City-St-Zip: HAMBURG, NY

Title: D () Delete
Name: O'CONNELL, STEPHAN P.,
Address: 19521 DORR RD
City-St-Zip: ALTOONA, FL 32702

Title: VD () Delete
Name: BLACKMON, CLAUDE F.,
Address: 1015 N FLORIDA AVE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: DUTTON, ANTHONY L.,
Address: 1800 ONE M&T PLAZA
City-St-Zip: BUFFALO, NY

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: C. FRED BLACKMON

VD

01/05/2009

Electronic Signature of Signing Officer or Director

Date