2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005929

Address:

City-St-Zip:

WINTER HAVEN, FL 338804954

Entity Name: HERITAGE EDUCATIONAL SERVICES, INC.

FILED Jul 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2905 BROOKS ST. 2905 BROOKS ST. LAKELAND, FL 338134353 LAKELAND, FL 33803 **Current Mailing Address: New Mailing Address:** 3834 DALE ST. LAKELAND, FL 338134353 FEI Number: 59-3735517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PADGETT, RANDY J 3834 DALÉ ST. LAKELAND, FL 338134353 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PADGETT, ANITA R Name: Name: 3834 DALE ST. Address: Address: City-St-Zip: LAKELAND, FL 338134353 City-St-Zip: Title: VPA Title: () Delete () Change () Addition Name: PADGETT, RANDY J Name: Address: 3834 DALE ST. Address: City-St-Zip: LAKELAND, FL 338134353 City-St-Zip: Title: STD () Delete Title: () Change () Addition FOSTER, SUSAN H Name: Name: Address: 490 LUCILLE ST. Address: City-St-Zip: BARTOW, FL 33830 City-St-Zip: Title: ΑТ () Delete Title: () Change () Addition Name: HARTHAN, KIM Name: 6328 SWEETWATER DR. EAST Address: Address: City-St-Zip: LAKELAND, FL 33811 City-St-Zip: () Delete Title: Title: () Change () Addition TORRES, VIVIANA Name: Name: 215 CRYSTAL CT. SW

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RANDY J. PADGETT **VPA** 07/03/2004