2004 FOR PROFIT CORPORATION

P00000030052

1. Entity Name
HEIR-A-PARENT, INC.

FILED
Mar 17, 2004 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
444 OLD COUNTRY RD. WELLINGTON, FL 33414	444 OLD COUNTRY RD. WELLINGTON, FL 33414

03152004

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0995553

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75**

6. Name and Address of Current Registered Agent

BENZ, FRANCES G
444 OLD COUNTRY RD.
WELLINGTON, FL 33414

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00**

000000030606
03/17/04-80026-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BENZ, FRANCES G
STREET ADDRESS	444 OLD COUNTRY ROAD
CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frances G Benz 3/15/04 561-790-0714
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FRANCES G. BENZ