2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000015541

1. Entity Name

ATTENTION DEFICIT, INC.



FILED Mar 10, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

3260 UNIVERSITY BLVD SUITE 210 WINTER PARK, FL 32792 3260 UNIVERSITY BLVD SUITE 210 WINTER PARK, FL 32792



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02122008 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 59-3709044
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HEEKIN, JAMES F JR 215 N EOLA DRIVE ORLANDO, FL 32801

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registered offi	CB OF F	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title is	f applicable. (NOTE: Registered Agent	signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000851303 03/25/08-80034-014 150.00
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HEAVENER, JUDSON CHASE 3260 UNIVERSITY BLVD SUITE 210 WINTER PARK, FL 32792				
TITLE NAME STREET ADDRESS CITY-ST-7IP	DP HEAVENER, CHRIS 3260 UNIVERSITY BLVD SUITE 210				

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19. 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:

TITLE

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

HEAVENER, JAMES W

3260 UNIVERSITY BLVD #210

WINTER PARK, FL 32792

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIREC

Davime Phone s