

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90061 001 *1,350.00

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04162004 Chg-P CR2E034 (10/03)

DOCUMENT # P01000029475 1. Entity Name THE HEATON COMPANIES, INC.					
Principal Place of Business 319 CLEMATIS STREET STE 702 WEST PALM BEACH, FL 33401			Mailing Address 319 CLEMATIS STREET STE 702 WEST PALM BEACH, FL 33401		
2. Principal Place of Business 2655 N Ocean Dr Suite, Apt. #, etc. 400		3. Mailing Address 2655 N Ocean Dr Suite, Apt. #, etc. 400			
City & State Singer Island FL Zip 33407 Country USA		City & State Singer Island FL Zip 33407 Country USA		4. FEI Number 65-1090074	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SBAR, MARIAN H 220 S FRANKLIN ST TAMPA, FL 33602			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HEATON, LINN D <input type="checkbox"/> Delete 319 CLEMATIS STREET STE 702 WEST PALM BEACH, FL 33401		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2655 N Ocean Dr # 400 WPB FL 33407	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HEATON, LEE W <input type="checkbox"/> Delete 319 CLEMATIS STREET STE 702 WEST PALM BEACH, FL 33401		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2655 N Ocean Dr # 400 Singer Island FL 33407	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WESTON, GEORGE W <input type="checkbox"/> Delete 319 CLEMATIS STREET STE 702 WEST PALM BEACH, FL 33401		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition George W Heaton 2655 W Ocean N Ocean Dr # 400 Singer Island FL 33407	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:			Linn D Heaton 4/16/04 561-4334810 <small>Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		