

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90026 047 ***150.00

DOCUMENT # P02000073293

1. Entity Name

HEAVENS TO BETSY, INC.



Principal Place of Business

1973 HERDER PKWY
LANTANA FL 33462

Mailing Address

1973 HERDER PKWY
LANTANA FL 33462



2. Principal Place of Business - No P.O. Box #

1050 Island Manor Dr

3. Mailing Address

1050 Island Manor Dr

1st MOORE

CR2E034 (10/07)

Site, Apt. #, etc.

Site, Apt. #, etc.

City & State

Greenacres FL

City & State

Greenacres FL

4. FEI Number

54-2069860

Applied For

Not Applicable

Zip

33413

Country

USA

Zip

33413

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

YEEND, JOHN
1109 S. CONGRESS AVE.
WEST PALM BEACH FL 33406

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and U.S. Representative

SOLE Registered Agent (signature required)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PVPS ☐ Delete
NAME WEATHERS, ELIZABETH P
STREET ADDRESS 1973 HERDER PKWY
CITY-ST-ZIP LANTANA FL 33462

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME ← Same as 10.
STREET ADDRESS ← 1050 Island Manor Dr
CITY-ST-ZIP Greenacres, FL 33413

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 empowerments.

SIGNATURE: Elizabeth P. Weathers Elizabeth P. Weathers 1/24/08 561-439-6567

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Case

Debate Fee #