

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107597

Entity Name: SETH HEITZMAN CONSTRUCTION, INC.

FILED  
Apr 29, 2006  
Secretary of State

## Current Principal Place of Business:

H47 RT. 9, BOX 4555  
LAKE CITY, FL 32024

## New Principal Place of Business:

880 SW SISTERSWELCOME RD  
SUITE 105  
LAKE CITY, FL 32025

## Current Mailing Address:

PO BOX 3642  
LAKE CITY, FL 32056

## New Mailing Address:

FEI Number: 20-0272255

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEITZMAN, SETH A  
H47 RT. 9, BOX 4555  
LAKE CITY, FL 32056 US

## Name and Address of New Registered Agent:

HEITZMAN, SETH A  
6917 SW HWY 47  
LAKE CITY, FL 32024 US

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: SETH A HEITZMAN

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: HEITZMAN, SETH A  
Address: H47 RT. 9, BOX 4555  
City-St-Zip: LAKE CITY, FL 32056

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: HEITZMAN, SETH A  
Address: 6917 SW HWY 47  
City-St-Zip: LAKE CITY, FL 32024

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SETH A HEITZMAN

DPST

04/29/2006

Electronic Signature of Signing Officer or Director

Date