

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90041 038 ***150.00

DOCUMENT # P03000117995	
1. Entity Name HERITAGE MAINTENANCE & REPAIR, INC.	

Principal Place of Business 2567 WRIGHT AVE. MELBOURNE FL 32935	Mailing Address 2567 WRIGHT AVE. MELBOURNE FL 32935
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2. Principal Place of Business - No P.O. Box # 2567 Wright Ave.	3. Mailing Address 2567 Wright Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State Melbourne, Fl.	City & State Melbourne, Fl.
Zip 32935	Country

4. FEI Number 59-2413507	Applied For ☐ Not Applicable
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6. Name and Address of Current Registered Agent MILLER, THOMAS A 2567 WRIGHT AVE MELBOURNE FL 32935	7. Name and Address of New Registered Agent Name Miller, Thomas A. Street Address (P.O. Box Number is Not Acceptable) 2567 Wright Ave. Melbourne, Fl. 32935 City Melbourne, Fl. 32935 FL Zip Code
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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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 title, if applicable. (NOTE: Registered Agent signature required when submitting a change of agent.) 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, THOMAS A 2355 SADLER LN MELBOURNE FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, THOMAS A 2355 SADLER LN MELBOURNE FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MILLER, THOMAS A 2355 SADLER LANE MELBOURNE FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MILLER, THOMAS A 2355 SADLER LANE MELBOURNE FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 empowered.

SIGNATURE Thomas A. Miller **THOMAS A. MILLER** **MAR 10 08** **321-432-3964**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR