2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128375

FILED May 13, 2004 Secretary of State

Entity Na	me: HEFFNE	ER, INCORPORATED				
Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
	DCOAST AVE HILL, FL 3460					
Current Mailing Address:			New Mailing Address:			
	DCOAST AVE HILL, FL 3460					
FEI Number	: 20-0342253	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and	Address	of New Registered Agent:	
4553 GOL	R, GEORGIA L DCOAST AVE HILL, FL 3460	Ī				
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registere	ed office or registered agent, or both,	
SIGNATUI	RE:					
Electronic Signature of Registered Agent			ent		Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution ().	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD (HEFFNER, SR 4553 GOLDCO SPRING HILL,	DAST AVE	Title: Name: Address: City-St-Zip:	4553 GOL	(X) Change()Addition , SCOTT W SR DCOAST AVE ILL, FL 34609	
Title: Name: Address: City-St-Zip:	T (STANZIONE, I 316 TULIP LAI INVERNESS, I	NE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD (HEFFNER, GE 4353 GOLDCO SPRING HILL,	DAST AVE	Title: Name: Address: City-St-Zip:		() Change() Addition	
Title: Name: Address: City-St-Zip:	S (STANZIONE, I 316 TULIP LA INVERNESS, I	NE	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT W HEFFNER SR PD 05/13/2004