

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90557 045 ***150.00



DOCUMENT # P03000136110

1. Entity Name

GARRY HEFLER CONSTRUCTION INC.

Garry Hefler Construction Inc.

Principal Place of Business

722 BRASSIE LANE
KISSIMMEE, FL 34759

Mailing Address

722 BRASSIE LANE
KISSIMMEE, FL 34759

34000000



01062004

Chg-P

CR2E034 (10/03)

2. Principal Place of Business

722 Brassie Lane

Suite, Apt. #, etc.

3. Mailing Address

722 Brassie Lane

Suite, Apt. #, etc.

City & State

Kissimmee, Florida

City & State

Kissimmee, Florida

4. FEI Number

43-2086071

☒ Applied For

☐ Not Applicable

Zip

34759

Country

USA

Zip

34759

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAILEY, SONJA J
722 BRASSIE LANE
KISSIMMEE, FL 34759

7. Name and Address of New Registered Agent

Name: Garry Hefler / Sonja Hefler
Street Address (P.O. Box Number is Not Acceptable)

722 Brassie Lane

City

Kissimmee

FL

Zip Code

34759

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] / Sonja Hefler

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: Registered Agent ☒ Delete
NAME: Bailey Sonja J.
STREET ADDRESS: 722 Brassie Lane
CITY-ST-ZIP: Kissimmee, FL 34759

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 11

TITLE: President/Owner ☒ Change ☐ Ad
NAME: Garry Hefler
STREET ADDRESS: 722 Brassie Lane
CITY-ST-ZIP: Kissimmee, FL 34759

TITLE: Registered Agent ☐ Change ☒ Ad
NAME: Garry Hefler
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Ad
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Ad
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Ad
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Ad
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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 changed, or on an attachment with an address, with all other like empowered.

[Signature]