## **2004 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

**DOCUMENT # P03000136110** 

خشده نشد ه



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

1. Entity Name GARRY HEFLER CONSTRUCTION INC.								04-26-2004 90557 045 ***150.00					
Garn	1.Hef	ler Cone	struct	ion In	)C ·		TEST						
Principal Place 722 BRASSII KISSIMMEE,	E LANE	S		Mailing Address 722 BRASSIE LAN KISSIMMEE, FL 3						9400	ve ve	<u> </u>	
in a			,	MOSIMMEE, I E S	4733								
2. Principal Place of Business 722 Brassle Lane				799 Brosse Lane			0)						
Suite, Apt.				Suite, Apt. #, etc.				010620	004	Chg-P	CR2E	034 (10/03)	
	imme	e, Floric	la r	City & State		pride	<u>a_</u>	4. FEIN	umber ^	08/007	Ц	No	oplied Foot of Applic
3475		Country USA		<sup>zip</sup> 34759	Cour	ή <u>ή</u>	_			Status Desired		\$8.75 Add	ditional ed
	<del></del>	and Address of	· -	stered Agent	- +	Name /	Qan	1.1	Pfl	ddress of New	SAL L	O HE	HPC
BAILEY, SONJA J 722 BRASSIE LANE KISSIMMEE, FL 34759						Street A	ddress (			is Not Accepta	ble)		
KIOOHVIIVIE	-E., I E 0-71	155				City	122	Bras	<b>351</b> 6	elane		7:- 0-4	
8. The above named entity subports this statement for the purpose of changing its regi								on agent of		in the State of	Florida Lam		
	tions of regist			pulpaga or origing		o 11	. /) /) .	ou agent, t	л <b>Б</b> ОБ1,	III tile State of	nonda. Tan	, , , , , , , , , , , , , , , , , , , ,	810 80
SIGNATURE	Signature, typed	or printed name of regist	ered agent and title	e if applicable.	(NOTE: Registere	2 HQ ed Agent signat	turb)equired	when reinstation	ng)		DATE	·	<del></del>
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign F Trust Fund Contribute												<del>.</del>	
								.00 May E ed to Fees				, , ,	
After M	ay 1, 200	4 Fee will be OFFICE	<b>\$550.00</b> RS AND DIRE	Trust Fund	Contribution.		Add	ed to Fees	ONS/C	HANGES TO O			
10. TITLE NAME STREET ADDRESS	Regis Baller Taa B	office dered floe if Sonjoin rassie La	\$550.00 RS AND DIRE HT T.	Trust Fund	Contribution.  11.  TITL  NAN  STR	E AE EET ADDRESS	Pre Gar 793	ADDITION ADD	ONS/C TT/(C F)e	Dinner		D DIRECTOR  Change	S IN 11
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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 informational 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 direct 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 of the corporation or on an attachment with an address, with all other like empowered.