

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000106220

1. Entity Name
HEATHER FITZPATRICK, INC.



Principal Place of Business
29815 PRAIRIE FALCON DR
WESLEY CHAPEL, FL 33543 US

Mailing Address
29815 PRAIRIE FALCON DR
WESLEY CHAPEL, FL 33543 US

FILED
Apr 16, 2007 08:00 AM
Secretary of State



02052007 No Chg-P CR2E034 (11/05)

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4. FEI Number
20-1530263

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FITZPATRICK, HEATHER 29815 PRAIRIE FALCON DR WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FITZPATRICK, JAMES 29815 PRAIRIE FALCON DR WESLEY CHAPEL, FL 33543
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04/24/07-80075-018 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/07

Date

Daytime Phone #