2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000114899

1. Entity Name
M. L. HEISSLER, INC.

Principal Place of Business	Mailing Address
12918 CHETS CREEK DRIVE SOUTH JACKSONVILLE, FL 32224 US	12918 CHETS CREEK DRIVE SOUTH JACKSONVILLE, FL 32224 US

DO NOT WRITE IN THIS SPACE

01162007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-3326144	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HEISSLER, MARY L
12918 CHETS CREEK DRIVE SOUTH
JACKSONVILLE, FL 32224

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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 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	PST	
NAME	HEISSLER, MARY L	
STREET ADDRESS	12918 CHETS CREEK DRIVE SOUTH	
CITY-ST-ZIP	JACKSONVILLE, FL 32224	
TITLE		
NAME		
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TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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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: _Mary S Heissler_ Mary L Heissler 3/12/07 Sal 942 1495

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

904 992 1135