

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113083

Entity Name: HERITAGE VAN LINES, INC

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

1571 WEST COPANS ROAD
SUITE 101
POMPANO BEACH, FL 33062 US

Current Mailing Address:

1571 WEST COPANS ROAD
SUITE 101
POMPANO BEACH, FL 33062 US

FEI Number: 20-5466875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASSARO, LOUIS
1571 WEST COPANS ROAD
SUITE 101
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

1571 WEST COPANS ROAD
SUITE 101
POMPANO BEACH, FL 33064 US

New Mailing Address:

1571 WEST COPANS ROAD
SUITE 101
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

MASSARO, LOUIS A
1571 WEST COPANS ROAD
SUITE 101
POMPANO BEACH, FL 33064 US

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.

SIGNATURE: LOUIS A MASSARO

01/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MASSARO, LOUIS
Address: 1571 WEST COPANS ROAD SUITE 101
City-St-Zip: POMPANO BEACH, FL 33062 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: MASSARO, LOUIS A
Address: 1571 WEST COPANS ROAD SUITE 101
City-St-Zip: POMPANO BEACH, FL 33064 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LINDSAY D NORMAN

MS

01/23/2009

Electronic Signature of Signing Officer or Director

Date