## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000091928

Entity Name: HERITAGE NETWORKS INC

FILED Apr 10, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

172 ALHAMBRA AVE 931 NORTH STATE ROAD 434

ALTAMONTE SPRINGS, FL 32714 1201-240

ALTAMONTE SPRINGS, FL 32714 70

Current Mailing Address: New Mailing Address:

931 NORTH STATE RD 434 931 NORTH STATE ROAD 434

1201-240 1201-240

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714 70

FEI Number: 22-3967544 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI, FL 33145 US

CRISPI, GEORGE F C
1120 BOREAS DRIVE
ORLANDO, FL 32822

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: GEORGE F CRISPI 04/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PTD ( ) Delete Title: CEO (X) Change ( ) Addition

Name: THOMASON, BRIAN S Name: THOMASON, BRIAN S

Address: 172 ALHAMBRA AVE Address: 931 NORTH STATE ROAD 434 STE 1201-240

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VSD ( ) Delete Title: C (X) Change ( ) Addition

 Name:
 THOMASON, LAURA
 Name:
 CRISPI, GEORGE F C

 Address:
 172 ALHAMBRA AVE
 Address:
 1120 BOREAS DRIVE

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714
 City-St-Zip:
 ORLANDO, FL 32822

Title: ( ) Delete Title: VPTS ( ) Change (X) Addition

Name: Name: THOMASON, BRIAN S VPTS

Address: Address: 931 NORTH STATE ROAD 434 STE 1201-240

City-St-Zip: City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: BRIAN THOMASON CEO 04/10/2009