2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P97000078885

1. Entity Name
A. MARGARET HESFORD, P.A.

Principal Place of Business	Mailing Address
5648 W ATLANTIC BOULEVARD	5648 W ATLANTIC BOULEVARD
MARGATE, FL 33063	MARGATE, FL 33063

DO NOT WRITE IN THIS SPACE

02282007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0783043	Not Applicable

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

6. Name and Address of Current Registered Agent

HESFORD, A. MARGARET
5648 W ATLANTIC BOULEVARD
MARGATE, FL 33063

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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

U000000585457

04/09/07-80008-002   150.00

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	D
NAME	HESFORD, A. MARGARET
STREET ADDRESS	5648 W ATLANTIC BOULEVARD
CITY-ST-ZIP	MARGATE, FL 33063

TITLE	
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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: _____ A. MARGARET HESFORD 3/27/07 954-972-0901

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