2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000426

Jul 13, 2007 Secretary of State

Entity Name: HEART OF THE SHEPHERD FAMILY SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

10670- NE 227 PLACE RD 601 NE 61 TERRACE ORANGE SPRINGS, FL 32182 OCALA, FL 34470

Current Mailing Address: New Mailing Address:

601 NE 61 TERRACE P.O. BOX 151 ORANGE SPRINGS, FL 32182 OCALA, FL 34470

FEI Number: 59-3555426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

KUNZ, MELVIN KUNZ, MELVIN 10670- NE 227 PLACE RD. 601 NE 61 TERRACE ORANGE SPRINGS, FL 32182 US OCALA, FL 34470

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: 07/13/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition KUNZ, MELVIN KUNZ, MELVIN Name: Name:

10670 NE 227 PL RD Address: 601 NE 61 TERRACE Address: City-St-Zip: ORANGE SPRINGS, FL 32182 City-St-Zip: OCALA, FL 34470

Title: VD () Delete Title: (X) Change () Addition Name: KUNZ, MARIAN Name: KUNZ, MARIAN

Address: 10670 NE 227 PL RD Address: 601 NE 61 TERRACE City-St-Zip: ORANGE SPRINGS, FL 32182 City-St-Zip: OCALA, FL 34470

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

KUNZ, JONATHAN Name: KUNZ, JONATHAN Name: Address:

1130 VESPER DRIVE 3876 HIDDEN ACRES CIRCLE Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: NO. FT MYERS, FL 33903

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELVIN R. KUNZ PD 07/13/2007