

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004553

Entity Name: HEARTLAND FOR CHILDREN, INC.**Current Principal Place of Business:**1239 E MAIN ST
2ND FLOOR
BARTOW, FL 33830**Current Mailing Address:**1239 E MAIN ST
2ND FLOOR
BARTOW, FL 33830 US**FEI Number:** 02-0619609**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAUGHERTY, KIM CEO
1239 E MAIN ST
BARTOW, FL 33830 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:** KIM DAUGHERTY

02/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name ACEVEDO, CYNTHIA
Address 1239 E MAIN ST
2ND FLOOR
City-State-Zip: BARTOW FL 33830

Title CFO
Name HALFERTY, JAY
Address 1239 E MAIN ST
2ND FLOOR
City-State-Zip: BARTOW FL 33830

Title CHAIR
Name HAAS, TAMMI
Address 1239 EAST MAIN ST.
City-State-Zip: BARTOW FL 33830

Title AUDIT CHAIR
Name CAMPBELL-DOMINECK, STACY
Address 1239 EAST MAIN ST.
City-State-Zip: BARTOW FL 33830

Title FINANCE CHAIR
Name JOHNSON, CHRISTIA
Address 1239 EAST MAIN ST.
City-State-Zip: BARTOW FL 33830

Title DIRECTOR
Name JILES, SHAWN
Address 1239 EAST MAIN ST.
City-State-Zip: BARTOW FL 33830

Title DIRECTOR
Name COX, STEPHEN
Address 1239 EAST MAIN ST.
City-State-Zip: BARTOW FL 33830

I hereby 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 all other like empowered.

SIGNATURE: JAY HALFERTY

CFO

02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date