

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000010844

Entity Name: HEART GALLERY BIG BEND, INC.**Current Principal Place of Business:**1801 MICCOSUKEE COMMONS DR
TALLAHASSEE, FL 32308**Current Mailing Address:**1801 MICCOSUKEE COMMONS DR
TALLAHASSEE, FL 32308 US**FEI Number: 81-2446706****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THURMAN, D. CHRISTINE ESQ
241 E 6TH AVE
TALLAHASSEE, FL 32308 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	WRIGHT, DONNA
Address	1801 MICCOSUKEE COMMONS DR
City-State-Zip:	TALLAHASSEE FL 32308

Title	BR
Name	BARKSDALE, JACKIE
Address	1801 MICCOSUKEE COMMONS DR
City-State-Zip:	TALLAHASSEE FL 32308

Title	T
Name	ANN CLARK, LEIGH
Address	1801 MICCOSUKEE COMMONS DR
City-State-Zip:	TALLAHASSEE FL 32308

Title	S
Name	ODOM, CINDY
Address	1801 MICCOSUKEE COMMONS DR
City-State-Zip:	TALLAHASSEE FL 32308

Title	VP
Name	PYPER, GORDY
Address	1801 MICCOSUKEE COMMONS DR
City-State-Zip:	TALLAHASSEE FL 32308

Title	BR
Name	DONOFRO, KATHY
Address	1801 MICCOSUKEE COMMONS DR
City-State-Zip:	TALLAHASSEE FL 32308

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: LEIGH ANN CLARK**TREASURER****04/28/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date