

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000005798

**Entity Name:** KINDHEARTS, INC.**Current Principal Place of Business:**6200 METROWEST BLVD., #201  
ORLANDO, FL 32835**Current Mailing Address:**6200 METROWEST BLVD., #201  
ORLANDO, FL 32835 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NOBLES, LATOSCHA SHERRE  
6200 METROWEST BLVD., #201  
ORLANDO, FL 32835 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:** LATOSCHA S. NOBLES

04/13/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	NOBLES, LATOSCHA S
Address	6200 METROWEST BLVD., #201
City-State-Zip:	ORLANDO FL 32835

Title	D
Name	JACKSON, NICAYUH'
Address	6200 METROWEST BLVD., #201
City-State-Zip:	ORLANDO FL 32835

Title	T
Name	FELDER, SABRINA
Address	6200 METROWEST BLVD., #201
City-State-Zip:	ORLANDO FL 32835

Title	S
Name	LEGGETT, VICKIE L
Address	6200 METROWEST BLVD., #201
City-State-Zip:	ORLANDO FL 32835

Title	V
Name	ERNEST EUGENE MOSLEY
Address	6200 METROWEST BLVD., #201
City-State-Zip:	ORLANDO FL 32835

Title	D
Name	HARRIS, ZHANE I
Address	6200 METROWEST BLVD., #201
City-State-Zip:	ORLANDO FL 32835

*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:** LATOSCHA S. NOBLES

FOUNDER

04/13/2021

Electronic Signature of Signing Officer/Director Detail

Date