2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23000056955

Entity Name: 2ND CHANCE AT HEART, INC.

Current Principal Place of Business:

901 NW 8TH AVENUE SUITE B5-1 GAINESVILLE, FL 32601

Current Mailing Address:

901 NW 8TH AVENUE SUITE B5-1 GAINESVILLE, FL 32601

FEI Number: 93-2743727

Name and Address of Current Registered Agent:

JACKSON, DIANE 9200 NW 39TH AVE SUITE 130-3063 GAINESVILLE, FL 32606 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.

			02/06/2024
Electronic Signature of Registered Agent			Date
or Detail :			
	Title	VP	
IENDERSON, AMANDA	Name	MAXWELL, GREGORY SR	
01 NW 8TH AVENUE SUITE B5-1	Address	25130 NW 9TH LANE	
GAINESVILLE FL 32601	City-State-Zip:	NEWBERRY FL 32669	
	Title	т	
DIANE , JACKSON	Name	WILLIAMS, ANGELICA	
34 SE 21ST STREET	Address	1820 NE 2ND STREET	
GAINESVILLE FL 32641	City-State-Zip:	GAINESVILLE FL 32609	
IAXWELL, GREGORY JR			
5130 NW 9TH LANE			
IEWBERRY FL 32669			
	or Detail : ENDERSON, AMANDA D1 NW 8TH AVENUE SUITE B5-1 AINESVILLE FL 32601 IANE , JACKSON 34 SE 21ST STREET AINESVILLE FL 32641 AXWELL, GREGORY JR 5130 NW 9TH LANE	or Detail : Title ENDERSON, AMANDA Name D1 NW 8TH AVENUE SUITE B5-1 Address AINESVILLE FL 32601 City-State-Zip: Title Title IANE , JACKSON Name 34 SE 21ST STREET Address AINESVILLE FL 32641 City-State-Zip: AXWELL, GREGORY JR Si30 NW 9TH LANE	TitleVPENDERSON, AMANDANameMAXWELL, GREGORY SRD1 NW 8TH AVENUE SUITE B5-1Address25130 NW 9TH LANEAINESVILLE FL 32601City-State-Zip:NEWBERRY FL 32669TitleTIANE , JACKSONNameWILLIAMS, ANGELICA34 SE 21ST STREETAddress1820 NE 2ND STREETAINESVILLE FL 32641City-State-Zip:GAINESVILLE FL 32609

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

OWNER

SIGNATURE: AMANDA HENDERSON

Electronic Signature of Signing Officer/Director Detail

FILED Feb 06, 2024 Secretary of State 5937579288CC

Certificate of Status Desired: No

02/06/2024 Date