

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700146

FILED
Jan 09, 2009
Secretary of State

Entity Name: ROGERS HEART FOUNDATION, INC.

Current Principal Place of Business:

4140-A FIFTH AVENUE N.
SAINT PETERSBURG, FL 33713 US

New Principal Place of Business:

Current Mailing Address:

4140-A FIFTH AVENUE N.
SAINT PETERSBURG, FL 33713 US

New Mailing Address:

FEI Number: 59-0906410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BULLEIT, DONALD
501 1ST AVE NORTH
STE 900
ST PETERSBURG, FL 33705 US

Name and Address of New Registered Agent:

BULLEIT, DONALD
2301 PELHAM ROAD NORTH
ST PETERSBURG, FL 33710 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:

01/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BULLEIT, DON,
Address: 501 1ST AVE, #900
City-St-Zip: ST PETERSBURG, FL

Title: D () Delete
Name: MARR, NORVAL M.,
Address: 1 BEACH DR., S.E.
City-St-Zip: ST. PETERSBURG, FL

Title: PD () Delete
Name: LACAMERA, FRANK JR
Address: 1601 SERPENTINE DR S
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: VD () Delete
Name: SIVER, ROBERT
Address: 114 GIRALDA BLVD. NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: D () Delete
Name: RUTLAND, ARDITH
Address: 501 COFFEE POT RIVIERA NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: SDTD () Delete
Name: MILLER, THOMAS
Address: 234 ESTADO WAY NE
City-St-Zip: ST PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BULLEIT, DON,
Address: 2301 PELHAM ROAD NORTH
City-St-Zip: ST PETERSBURG, FL 33710

Title: D (X) Change () Addition
Name: MARR, NORVAL M.,
Address: 501 COFFEE POT RIVIERA NE
City-St-Zip: ST. PETERSBURG, FL 33704

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CLIFTON, EDNA
Address: 1025 40 AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FRANK LACAMERA, JR

PD

01/09/2009

Electronic Signature of Signing Officer or Director

Date