2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708122

FILED Jul 10, 2008 Secretary of State

Entity Name: HEART OF FLORIDA EDUCATIONAL FOUNDATION, INC.

US

Current Principal Place of Business: New Principal Place of Business:

7722 STATE ROAD 544 WINTER HAVEN, FL 33881

Current Mailing Address: New Mailing Address:

P O BOX 188

HAINES CITY, FL 33845 US

FEI Number: 59-6159367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAREFOOT, GEORGE H DODD, ROBERT E

7722 S R 544 EAST
WINTER HAVEN, FL 33881 US
1101 FİRST STREET SOUTH
WINTER HAVEN, FL 33880 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: ROBERT E. DODD 07/10/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: CT (X) Change () Addition

Name:ROCKER, THOMAS JName:DODD, ROBERT EAddress:6039 CYPRESS GARDEN BLVD #242Address:228 CREST DRIVE

City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: HAINES CITY, FL 33844

Title: TD () Delete Title: TT (X) Change () Addition Name: PINNER, ERNEST S Name: PINNER, ERNEST S

Address: 54 PINE FOREST DRIVE Address: 54 PINE FOREST DRIVE
City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete Title: T (X) Change () Addition

 Name:
 PRATT, JEAN
 Name:
 PRATT, JEAN

 Address:
 101 FAIRWAY DR.
 Address:
 101 FAIRWAY DR.

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 HAINES CITY, FL 33844

Title: D () Delete Title: T (X) Change () Addition

Name: BROADWAY, DENNIS Name: BROADWAY, DENNIS

Address: P.O. BOX 337

Other St. Zing HANNES CITY FIL 239450327

City-St-Zip: HAINES CITY, FL 338450337 City-St-Zip: HAINES CITY, FL 338450337

Title: SD () Delete Title: T (X) Change () Addition

 Name:
 STOVALL, RENEE
 Name:
 STANGRY, THERON

 Address:
 1108 PENINSULAR DR.
 Address:
 222 STATE ROAD 60 EAST

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 LAKE WALES, FL 33853

Title: D () Delete Title: ST (X) Change () Addition

 Name:
 ROCKER, J THOMAS
 Name:
 ROCKER, J THOMAS

 Address:
 2740 SEQUOYAH DRIVE
 Address:
 2740 SEQUOYAH DRIVE

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 HAINES CITY, FL 33844

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: ROBERT E. DODD CT 07/10/2008