2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712925

Entity Name: HEART OF VOLUSIA, INC.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
412 S PALMETTO AVE (32114) PO BOX 3 DAYTONA BEACH, FL 32115				412 S PALMETTO AVE DAYTONA BEACH, FL 32114			
Current Mailing Address:				New Mailing Address:			
412 S PALMETTO AVE (32114) PO BOX 3 DAYTONA BEACH, FL 32115				PO BOX 3 DAYTONA BEACH, FL 32115			
FEI Number:	59-6194206	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired	d (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
AUMILLER, MARY FRANCIS 1670 ANITA STREET PORT ORANGE, FL 32128 US				LIBERI, JUDITH G ADMINIS 721 CRANE COURT PORT ORANGE, FL 32127 US			
The above in the State		ubmits this statement for the pu	irpose o	f changing it	ts registered of	ffice or registered agent, o	or both,
SIGNATURE: JUDITH G. LIBERI						04/17/2009	
	Electron	ic Signature of Registered Ager	nt			Date	
OFFICERS	AND DIREC	rors:		ADDITION	S/CHANGES	TO OFFICERS AND DIR	ECTORS:
Title: Name: Address: City-St-Zip:	T () SMITH, THEA 117 BRUSHWO PALM COAST, F			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	P () ALMILLER, MAR 1570 ANITA ST PORT ORANGE			Title: Name: Address: City-St-Zip:	P (X) AUMILLER, MAI 1570 ANITA ST PORT ORANGE		
Title: Name: Address: City-St-Zip:	1VP () SAPPINGTON, I 1009 N US 1 ORMOND BEAC			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	2VP () MORSE, ARI 102 BOB WHITI DAYTONA BEAG			Title: Name: Address: City-St-Zip:	2VP (X) MORSE, ARI 3408 COUNTRY SOUTH DAYTOR		
Title: Name: Address: City-St-Zip:	S () BUSHY, ANGEL 136 SHOAL CR DAYTONA BEAG	EEK CIR		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	3VP () HOCHSTETLER 1476 KILRUSH ORMOND BEAC	DR		Title: Name: Address: City-St-Zip:	()	Change () Addition	

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: MARY FRANCES AUMILLER P 04/17/2009