

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90007 015 ****70.00

DOCUMENT # 720463

1. Entity Name

HEARTBEAT, INC.



Principal Place of Business

162 FAIRWAY HILLS
P.O. BOX 228
WAYNESVILLE NC 28786
US

Mailing Address

162 FAIRWAY HILLS
P. O. BOX 228
WAYNESVILLE NC 28786
US

94024402



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TYLER, SARAH
4708 CENTER DRIVE
TALLAHASSEE FL 32310

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE SD
NAME PURVIS, SUSAN H. ☐ Delete
STREET ADDRESS 20 FAIRWAY HILLS
CITY-ST-ZIP WAYNESVILLE N.C.

TITLE VD
NAME PURVIS, THOMAS G. ☐ Delete
STREET ADDRESS 20 FAIRWAY HILLS
CITY-ST-ZIP WAYNESVILLE NC

TITLE PD
NAME PURVIS, NANCY P. ☐ Delete
STREET ADDRESS 20 FAIRWAY HILLS
CITY-ST-ZIP WAYNESVILLE N.C.

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 162 Fairway Hills
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 162 Fairway Hills
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 162 Fairway Hills
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas G. Purvis Thomas G. Purvis

Date

Daytime Phone #

2/29/04 828-456-3628