

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722445

FILED
May 10, 2012
Secretary of State

Entity Name: HEART FOR HAITI FOUNDATION, INC.

Current Principal Place of Business:

2424 SUNSET POINT RD
CLEARWATER, FL 33764 US

New Principal Place of Business:

Current Mailing Address:

2424 SUNSET POINT RD
CLEARWATER, FL 33764 US

New Mailing Address:

FEI Number: 23-7226989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULER, TIMOTHY C
9075 SEMINOLE BLVD
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: BUCKMASTER, GUY T
Address: 465 LAKEVIEW DR
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: FOUNTAINE-PHILBERT, NORMA
Address: 10712 BAMBOO ROD CIR
City-St-Zip: RIVERVIEW, FL 33569

Title: ST
Name: WOZNIAK, VINCE
Address: 100 HAMPTON RD., UNIT 260
City-St-Zip: CLEARWATER, FL 33759 US

Title: D
Name: RALSTON, DON DR
Address: 1460 CAIRN CT
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: MONNIER, T.H. DR
Address: 1845 MCCULLEY RD
City-St-Zip: CLEARWATER, FL 33765

Title: D
Name: CHARLES, LEONEL
Address: 2812-47TH AVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33712

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

SIGNATURE: TIMOTHY C. SCHULER

RA

05/10/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date