

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005652

FILED  
Mar 09, 2008  
Secretary of State

Entity Name: HEIFER PROJECT INTERNATIONAL, INC.

**Current Principal Place of Business:**

1 WORLD AVE  
LITTLE ROCK, AR 72202

**New Principal Place of Business:**

**Current Mailing Address:**

1 WORLD AVE  
LITTLE ROCK, AR 72202

**New Mailing Address:**

1 WORLD AVENUE  
LITTLE ROCK, AR 72202

FEI Number: 35-1019477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD.  
SUITE 508  
MIAMI, FL 33156 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 ( ) Delete  
Name: LUCK, JO  
Address: 1 WORLD AVE  
City-St-Zip: LITTLE ROCK, AR 72202

Title: SVP ( ) Delete  
Name: WRIGHT, TANYA  
Address: 1 WORLD AVE  
City-St-Zip: LITTLE ROCK, AR 72202

Title: SVP ( ) Delete  
Name: DE VRIES, JAMES  
Address: 1 WORLD AVE  
City-St-Zip: LITTLE ROCK, AR 72202

Title: CFO ( ) Delete  
Name: NEAL, JAMES  
Address: 1 WORLD AVE  
City-St-Zip: LITTLE ROCK, AR 72202

Title: SVP ( ) Delete  
Name: PETERSON, TOM  
Address: 1 WORLD AVE  
City-St-Zip: LITTLE ROCK, AR 72202

Title: SVP ( ) Delete  
Name: JARED, DONNA  
Address: 1 WORLD AVE  
City-St-Zip: LITTLE ROCK, AR 72202

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: JO LUCK

PRES

03/09/2008

Electronic Signature of Signing Officer or Director

Date