

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000007276

Entity Name: HEART OF AFRICA, INC.

FILED
Apr 05, 2006
Secretary of State

Current Principal Place of Business:

450 COLUMBUS CIRCLE
LONGWOOD, FL 32750

New Principal Place of Business:

100 CROWN OAK CENTRE DR.
SUITE A-3
LONGWOOD, FL 32750

Current Mailing Address:

450 COLUMBUS CIRCLE
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 35-2121414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, D. MICHAEL
450 COLUMBUS CIRCLE
LONGWOOD, FL 32750 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: PC () Delete
Name: HENDERSON, D. MICHAEL
Address: 450 COLUMBUS CIRCLE
City-St-Zip: LONGWOOD, FL 32750

Title: VPVC () Delete
Name: KIMBOWA, SAMUEL REV.
Address: 985 RAMSGATE ROAD
City-St-Zip: GREENWOOD, IN 46143

Title: STD () Delete
Name: HENDERSON, MARTHA
Address: 450 COLUMBUS CIRCLE
City-St-Zip: LONGWOOD, FL 32750

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HENDERSON, D. MICHAEL DR.
Address: 450 COLUMBUS CIRCLE
City-St-Zip: LONGWOOD, FL 32750 US

Title: S (X) Change () Addition
Name: MCELFISH, JULIA MS.
Address: 518 ONE CENTER BLVD., APT. 106
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: TD (X) Change () Addition
Name: HENDERSON, MARTHA MRS.
Address: 450 COLUMBUS CIRCLE
City-St-Zip: LONGWOOD, FL 32750 US

Title: D () Change (X) Addition
Name: AMANING, K. OWUSU MR.
Address: 1558 REBECCA PL.
City-St-Zip: LONGWOOD, FL 32779 US

Title: D () Change (X) Addition
Name: DAVIES, AUGUSTINE REV.
Address: 511 ERICA WAY
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: D () Change (X) Addition
Name: DEDEKIND, BRENDON MR.
Address: 3473 GERBER DAISY LN.
City-St-Zip: OVIEDO, FL 32766 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JULIA B. MCELFISH

S

04/05/2006

Electronic Signature of Signing Officer or Director

Date