2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000570

Entity Name: NATIONAL HERITAGE FOUNDATION, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6201 LEESBURG PIKE STE. 405 FALLS CHURCH, VA 22044 **New Mailing Address: Current Mailing Address:** 6201 LEESBURG PIKE STE. 405 FALLS CHURCH, VA 22044 FEI Number: 58-2085326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HOUK, JOHN T III Name: Name: 7604 HELENA DRIVE Address: Address: City-St-Zip: FALLS CHURCH, VA 22043 City-St-Zip: Title: Title: () Delete (X) Change () Addition RIDGELY, JAN Name: RIDGELY, JAN Name: Address: 6201 LEESBURG STE 405 Address: 1604 WOODMAR LN City-St-Zip: FALLS CHURCH, VA 22043 City-St-Zip: MCLEAN, VA 22101 Title: () Delete Title: COO (X) Change () Addition HOUK, MARIAN HOUK, MARIAN Name: Name: 6218 BEACHWAY DR. Address: Address: 6218 BEACHWAY DR. City-St-Zip: FALLS CHURCH, VA 22041 City-St-Zip: FALLS CHURCH, VA 22041 Title: () Delete Title: D (X) Change () Addition Name: FENTON, DANA C Name: FENTON, DANA C 6201 LEESBURG PIKE, STE. 405 Address: Address: 112377 MANCHESTER WAY City-St-Zip: FALLS CHURCH, VA 22044 City-St-Zip: WOODBRIDGE, VA 22192 Title: Title: (X) 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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

GILL, JONATHAN M

FAIRVAX, VA 22032

THIBODEAUX, TODD ALAN

884 N. PATRICK HENRY DR.

FALLS CHURCH, VA 22205

(X) Change () Addition

9610 JOMAR DR.

SIGNATURE: LISA WEIMHOLD AO 01/20/2009

() Delete

6201 LEESBURG PIKE, STE. 405

() Delete

FALLS CHURCH, VA 22044

THIBONDEAUX, TODD ALAN

FALLS CHURCH, VA 22205

1884 N. PATRICK HENRY DR.

GILL, JONATHAN M

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip: