

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000928

FILED
Jan 19, 2009
Secretary of State

Entity Name: HERITAGE FINANCIAL GROUP, INC.

Current Principal Place of Business:

120 W LEXINGTON AVE
ELKHART, IN 46514

New Principal Place of Business:

Current Mailing Address:

120 W LEXINGTON AVENUE
ELKHART, IN 46514

New Mailing Address:

120 W LEXINGTON AVE
ELKHART, IN 46514

FEI Number: 35-1517239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, RICHARD P
2155 DELTA BLVD., SUITE 210B
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: FULMER, L. CRAIG
Address: 120 WEST LEXINGTON
City-St-Zip: ELKHART, IN 46516

Title: CEO () Delete
Name: SMITH, BRIAN J
Address: 120 W. LEXINGTON
City-St-Zip: ELKHART, IN 46516

Title: ST () Delete
Name: MARTIN, SHARON R
Address: 120 W. LEXINGTON
City-St-Zip: ELKHART, IN 46516

Title: CEO () Delete
Name: MORRISON, DANIEL A
Address: 120 W. LEXINGTON AVENUE
City-St-Zip: ELKHART, IN 46516

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:

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

SIGNATURE: BRIAN J SMITH

CEO

01/19/2009

Electronic Signature of Signing Officer or Director

Date