

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003280

FILED
Mar 28, 2007
Secretary of State

Entity Name: THE MICHAEL G. HEISER FOUNDATION FOR THE REMEMBRANCE OF VICTIMS OF TERRORISM, INC.

Current Principal Place of Business:

10 LIVE OAK LANE
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

10 LIVE OAK LANE
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3670526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURTAGH, JOE
14 WAVECREST PL
PALM COAST, FL 32167 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: D () Delete
Name: HEISER, GARY
Address: 10 LIVE OAK LANE
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: HEISER, FRAN
Address: 10 LIVE OAK LANE
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: SHERWOOD, GARY L
Address: 10238 JAMES RIVER ROAD
City-St-Zip: SHIPMAN, VA 22974

Title: D () Delete
Name: KEITH, LINDA F
Address: 10 BEACH ST
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D () Delete
Name: BAKER, PAUL
Address: 6112 OXBOW BEND LANE
City-St-Zip: PORT ORANGE, FL 32128

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:

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: FRANCES N HEISER

MGRM

03/28/2007

Electronic Signature of Signing Officer or Director

Date