

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000006984					
1. Entity Name MENDING HEARTS CHARITIES, INC.					
Principal Place of Business 1205 W MICHIGAN STREET ORLANDO FL 32805			Mailing Address P.O. BOX 560609 ORLANDO FL 32856		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3681485	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GRONSKI, TERESA 1205 W MICHIGAN STREET ORLANDO FL 32805				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent					
SIGNATURE _____ Signature, typed or printed name of registered agent and local applicator (NOTE: Registered Agent signature required when re-electing) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add		
NAME	MCKINNESS, ANN	NAME			
STREET ADDRESS	1205 W MICHIGAN STREET	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add		
NAME	GRONSKI, TERESA L	NAME			
STREET ADDRESS	1205 W MICHIGAN STREET	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add		
NAME	BENEDETTO, KRISTEN	NAME			
STREET ADDRESS	1205 W MICHIGAN STREET	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add		
NAME	GRONSKI, JAMES E	NAME			
STREET ADDRESS	1205 W. MICHIGAN ST.	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add		
NAME	JACKSON, MAURIO	NAME			
STREET ADDRESS	1205 W. MICHIGAN ST.	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add		
NAME	PURSLEY, TIMOTHY	NAME			
STREET ADDRESS	1205 W. MICHIGAN ST.	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805	CITY-ST-ZIP			



1st MOORE CR2E037 (10/05)

4. FEI Number **59-3681485**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**
Make Check Payable to Florida Department of State

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
☐ Change ☐ Add
1100000540866
05/10/06-80035-007 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Teresa Gronski* **Teresa Gronski** 4-24-06 407-843-430