

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000258

FILED
Apr 17, 2009
Secretary of State

Entity Name: HEARTLAND CULTURAL ALLIANCE, INC.

Current Principal Place of Business:

110 N. CIRCLE PARK DR
SEBRING, FL 33870 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7154
SEBRING, FL 33872 US

New Mailing Address:

FEI Number: 65-1074665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS W. LENIHAN E.A., INC
154 W. CENTER AVE
SEBRING, FL 338703103 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: VP () Delete
Name: BRENNER, JO
Address: 1631 LAMBEAU AVE
City-St-Zip: SEBRING, FL 33875

Title: T () Delete
Name: PRESSLER, CHARLOTTE
Address: 425 ROSE AVE
City-St-Zip: SEBRING, FL 33870

Title: S () Delete
Name: GLENN, RAMONA
Address: 3801 OAKVIEW DR
City-St-Zip: SEBRING, FL 33876

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRENNER, JO MS
Address: 1631 LAMBEAU AVE
City-St-Zip: SEBRING, FL 33875 US

Title: T (X) Change () Addition
Name: PRESSLER, CHARLOTTE DR
Address: 425 ROSE AVE
City-St-Zip: SEBRING, FL 33870 US

Title: S (X) Change () Addition
Name: SERAFINO, SUNNY MS
Address: 615 E MOCKINGBIRD LANE
City-St-Zip: AVON PARK, FL 33825 US

Title: VP () Change (X) Addition
Name: LEWIS, SUSAN MS
Address: 3214 GRAND PRIX DR
City-St-Zip: SEBRING, FL 33872 US

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.

SIGNATURE: CHARLOTTE PRESSLER

DR

04/17/2009

Electronic Signature of Signing Officer or Director

Date