2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 8:00 am Secretary of State

DOCUMENT # N0100003003 1. Entity Name HEART OF THE EARTH, INC.						25-2005 90241		
Principal Place of Business 9601-16 MICCOSUKEE RD. TALLAHASSEE, FL 32308 Mailing Address 9601-16 MICCOSUKEE R TALLAHASSEE, FL 32308					I litimit to finit i	TO AM TUR ON DUL	ULTO 48811 O'O N1 69180 18	(1 17) o l 1 5 01
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04172005 Ch	g-NP CR2	2E037 (10/03)	
City & State		City & State			4. FEI Number 31-180913	0		plied For t Applicable
Zip ——-	Country	Zip	Country	` 	_5. Certificate of Sta	atus Desired	\$8.75 Add	
	6. Name and Address of Current F	Registered Agent				ess of New Registe	red Agent	
FRASER, BARRY 7939 S. BRIARCREEK RD. TALLAHASSEE, FL 32312 ONLY			Name FrASC, BACRY Street Address (P.O. Box Number is Not Acceptable) A SOSAW NENE					
	6	nly	City -	TA	Na hassee		FL Zip Cod	50 N
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 SIGNATURE SIGNATURE NOTE: Registered Agent signature required when reinstating) DATE								
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	Filing Fee is \$61.25 Due by May 1, 2005	Election Camp Trust Fund Cor	aign Financing		\$5.00 May Be Added to Fees	Make c	heck payable to epartment of St	
10.	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Camp Trust Fund Cor ECTORS	aign Financing		\$5.00 May Be Added to Fees	Make c	heck payable to epartment of St	ate
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12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 cath; that I am an officer or director of the corporation or the receiver or sustained appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NO TYPED OR PROTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-05

830-414-8655

Daytime Phone #