

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000003003

FILED
Apr 10, 2003
Secretary of State

Entity Name: HEART OF THE EARTH, INC.

Current Principal Place of Business:

9601-16 MICCOSUKEE RD.
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

9601-16 MICCOSUKEE RD.
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 31-1809130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRASER, BARRY
7939 S. BRIARCREEK RD.
TALLAHASSEE, FL 32312 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: FRASER, BARRY
Address: 7939 S. BRIARCREEK RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: CARDEA, NORINE
Address: 9601-16 MICCOSUKEE RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: CHANTON, JEFF
Address: 1509 HASOSAW NENE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: FRASER, LUCYANN WALKER
Address: 7939 S. BRIARCREEK RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: CERULEAN, SUSAN
Address: 9601-16 MICCOSUKEE RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: OAKSFORD, ED
Address: 2520 HARRIMAN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

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:

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 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 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: BARRY FRASER

D

04/10/2003

Electronic Signature of Signing Officer or Director

Date