2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004318

Entity Name: HEARTLAND AVIAN SOCIETY, INC.

FILED Apr 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3349 NORTHERN BLVD 2119 AVALON ROAD

LAKE PLACID, FL 33852 US SEBRING, FL 338701508 US

Current Mailing Address: New Mailing Address:

P.O. BOX 3864

SEBRING, FL 338713864 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOLDT, CATHY
2119 AVALON RD.

BOLDT, CATHY
2119 AVALON RD.

SEBRING, FL 33870 US SEBRING, FL 338701508 US

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: CATHY BOLDT 04/04/2009

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

SEBRING, FL 33870

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SEBRING, FL 338701401 US

itle: TD () Delete Title: TD (X) Change () Addition

 Name:
 BOLDT, CATHY
 Name:
 BOLDT, CATHY

 Address:
 2119 AVALON RD
 Address:
 2119 AVALON RD

City-St-Zip: SEBRING, FL 338701508 City-St-Zip: SEBRING, FL 338701508 US

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 TRAVISON, TOM
 Name:
 TRAVISON, TOM

 Address:
 306 BRIGHTON RD
 Address:
 306 BRIGHTON RD

Title: D () Delete Title: D (X) Change () Addition

Name:VELVA, JUNEName:DORSERY, CHERIEAddress:3349 NORTHERN BLVDAddress:727 LK JOSEPHINE DR

City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: SEBRING, FL 338756450 US

Title: SD () Delete Title: SD (X) Change () Addition Name: WHITE, CINDY Name: WHITE, CINDY

 Name:
 WHITE, CIND I

 Address:
 2301 SANTA ROSA AVE

 City-St-Zip:
 AVON PARK, FL 33825

 City-St-Zip:
 AVON PARK, FL 338259689 US

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 PUCKETT, GARY
 Name:
 DIAMOND, SHAROL

 Address:
 2623 MELLOW LN
 Address:
 1572 OAK AVE

City-St-Zip: SEBRING, FL 33870 City-St-Zip: LAKE PLACID, FL 33852 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SCHADE, KARIN
 Name:
 SCHADE, KARIN

 Address:
 839 ROLLINS ST
 Address:
 839 ROLLINS ST

City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 338527099

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: CATHY BOLDT T 04/04/2009