## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000007107

Feb 02, 2012 Secretary of State

FILED

Entity Name: FROM OUR HEARTS, INC.

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

15805 MISSOURI STREET 3627 CLIPPER LANE

BOKEELIA, FL 33922 ST JAMES CITY, FL 33956 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 356

MATLACHA, FL 33993 US

FEI Number: 16-1683119 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WASHBURN, KAREN OCONNOR, ANN M 15805 MISSOURI STREET 3627 CLIPPER LANE

BOKEELIA, FL 33922 ST JAMES CITY, FL 33956 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: ANN OCONNOR 02/02/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

TREA

OCONNOR, ANN Name: Address: 3627 CLIPPER LANE

City-St-Zip: ST JAMES CITY, FL 33956 US

Title: SEC

Name: KUBIK, SHARON Address: **2672 YORK RD** 

City-St-Zip: ST. JAMES CITY, FL 33956

Title:

VERNER, CONNIE Name: Address: 2368 LEMON ST

City-St-Zip: ST JAMES CITY, FL 33956

Title:

Name: KOFERL, MELISSA Address: 3839 PERKINS LANE

City-St-Zip: ST. JAMES CITY, FL 33956

Title: **PRES** 

WASHBURN, KAREN Name: 15805 MISSOURI STREET Address: City-St-Zip: BOKEELIA, FL 33922 US

I hereby 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 all other like empowered.

SIGNATURE: ANN OCONNOR **TREA** 02/02/2012