## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005643

Entity Name: ART FOR THE HEART CORP.

FILED Apr 15, 2005 Secretary of State

Current Principal Place of Business:			Now Princ	New Principal Place of Business:	
406 E. LIBE	<del>-</del>		New Princ	ipai Place of Business:	
Current Mailing Address:			New Mailii	New Mailing Address:	
406 E. LIBE BROOKSVI	ERTY ST. ILLE, FL 3460	I			
FEI Number: 20-1349087 FEI Number Applied For ( ) FE		FEI Number Not Appli	licable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SPIEGEL & 1840 SW 2: 4TH FLOOI MIAMI, FL	R				
The above in the State		ubmits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	E:				
Electronic Signature of Registered Agent			t	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () SPRINGSTEAD, 406 E. LIBERTY BROOKSVILLE,	ST.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () RUMMEL, PHYL 406 E. LIBERTY BROOKSVILLE,	ST.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	STD () WOLF, LYNN A 406 E. LIBERTY BROOKSVILLE,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () DANCSAK, JEAN 406 E. LIBERTY BROOKSVILLE,	ST.	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition RUMMEL, THOMAS R JR 1421 GILES AVE BROOKSVILLE, FL 34608	
Title: Name: Address: City-St-Zip:	D (X) HUSSON, MARIL 406 E. LIBERTY BROOKSVILLE,	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) DICKERSON, MA 406 E. LIBERTY BROOKSVILLE,	ST.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: PATRICIA R. SPRINGSTEAD PR 04/15/2005