

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008971

FILED
Feb 10, 2012
Secretary of State

Entity Name: QUEEN OF HEARTS FOUNDATION FOR DISABLED CHILDREN, INC.

Current Principal Place of Business:

738 DAVIDSON ST SE
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

738 DAVIDSON ST SE
PALM BAY, FL 32909

New Mailing Address:

FEI Number: 20-1716015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACOBY, DAVID H
2111 DAIRY RD
MELBOURNE, FL 32901 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: DPT
Name: KNOTT, MICHELE
Address: 738 DAVIDSON ST SE
City-St-Zip: PALM BAY, FL 32909

Title: DS
Name: SAKERS, MARCIE
Address: 2059 COLBY STREET
City-St-Zip: PALM BAY, FL 32905

Title: DV
Name: BECKETT, GLENN
Address: 105 MONACO RD
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: D
Name: TODD, LAND
Address: 6365 FREEPORT DRIVE
City-St-Zip: SPRING HILL, FL 34608 US

Title: D
Name: COLLINS, MATTHEW PH.D.
Address: 1318 S. MIRAMAR AVE # 101
City-St-Zip: INDIALANTIC, FL 32903 US

Title: D
Name: ESCOBAR, KIMBERLY
Address: 2089 LANSING STREET
City-St-Zip: MELBOURNE, FL 32935

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: MICHELE KNOTT

DPT

02/10/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date