2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

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Entity Name: DESIGNS FROM THE HEART, CORP.

Current Principal Place of Business:

P.O. BO X 51583
JACKSONVILLE BEACH, FL 32240 US

New Principal Place of Business:

P.O. BO X 51583
JACKSONVILLE BEACH, FL 32240 US

Current Mailing Address:

P.O. BOX 51583
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

FEI Number: 20-1800842 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICHOLSON, SHERI C
222 OLEANDER STREET
NEPTUNE BEACH, FL 32266 US

Name and Address of New Registered Agent:

TIPTON, MICHELLE M
2333 AZALEA DRIVE
JACKSONVILLE BEACH, FL 32250 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: MICHELLE TIPTON 04/25/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GREGORY, MICHELL C
Address: 30 TALLWOOD ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: VP ( ) Delete
Name: NICHOLSON, SHERI C
Address: 222 OLEANDER STREET
City-St-Zip: NEPTUNE BEACH, FL 32266 US

Title: VP ( ) Delete
Name: GEISSMANN, JULIE H
Address: 12 TALLWOOD ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: VP ( ) Delete
Name: HORN, KARRY A
Address: 3020 ST. JOHNS BLVD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: TRES ( ) Delete
Name: TIPTON, MICHELE M
Address: 3222 AZALEA DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: SEC ( ) Delete
Name: EIKILL, ROBIN D
Address: 6985 ALANA ROAD
City-St-Zip: JACKSONVILLE, FL 32211

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 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: MICHELLE TIPTON TRES 04/25/2007
Electronic Signature of Signing Officer or Director Date