

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009804

FILED  
May 12, 2008  
Secretary of State

**Entity Name:** DESIGNS FROM THE HEART, CORP.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**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 ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

**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:

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 M TIPTON

TREA

05/12/2008

Electronic Signature of Signing Officer or Director

Date