

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002415

FILED
Apr 25, 2007
Secretary of State

Entity Name: DAWN'S HEARTFELT CORNER, INC.

Current Principal Place of Business:

380 S. STATE RD. 434, STE. 1004, #247
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

380 S. STATE RD. 434, STE. 1004, #247
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 20-2479898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'BRIEN, DAWN M
380 S. STATE RD. 434, STE. 1004, #247
ALTAMONTE SPRINGS, FL 32714 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: PT () Delete
Name: O'BRIEN, DAWN M
Address: 380 S. STATE RD. 434, STE. 1004, #247
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: V () Delete
Name: O'BRIEN, DANIEL D
Address: 380 S. STATE RD. 434, STE. 1004, #247
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: SECR () Delete
Name: GRAHAM, LATARA
Address: 313 W. 14TH STREET
City-St-Zip: APOPKA, FL 32703 US

Title: OFFI () Delete
Name: STANSEL, LIEUT. CHUCK
Address: 225 NEWBURYPORT AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: OFFI (X) Delete
Name: RAY, LEE
Address: 7916 MEADOW GLEN DR.
City-St-Zip: ORLANDO, FL 32810 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change () Addition
Name: BLACK, PAIGE
Address: 462 WOLDUNN CIR
City-St-Zip: LAKE MARY, FL 32746 US

Title: DIR (X) Change () Addition
Name: STANSEL, LIEUT. CHUCK
Address: 225 NEWBURYPORT AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

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: DAWN O'BRIEN

PRES

04/25/2007

Electronic Signature of Signing Officer or Director

Date