2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002415

FILED Feb 08, 2012 Secretary of State

Entity Name: DAWN'S HEARTFELT CORNER, INC.

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: New Mailing Address:

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

FEI Number: 20-2479898 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

O'BRIEN, DAWN M 380 S. STATE RD. 434, STE. 1004, #247 ALTAMONTE SPRINGS, FL 32714 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: PT

Name: O'BRIEN, DAWN M

Address: 380 S. STATE RD. 434, STE. 1004, #247 City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: ∨

Name: O'BRIEN, DANIEL D

Address: 380 S. STATE RD. 434, STE. 1004, #247 City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: DIR

 Name:
 BLACK, PAIGE

 Address:
 462 WOLDUNN CIR

 City-St-Zip:
 LAKE MARY, FL 32746 US

Title: DIF

 Name:
 STANSEL, LIEUT. CHUCK

 Address:
 225 NEWBURYPORT AVENUE

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701 US

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: DAWN O'BRIEN PRES 02/08/2012