2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# N05000011591

Entity Name: HERO HUGS INC.

Current Principal Place of Business:

212 MCKINLEY STREET
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 27
NICEVILLE, FL 32588

New Mailing Address:

FEI Number: 20-4050718 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CALVERT-REESE, DIANA L
212 MCKINLEY STREET
NICEVILLE, FL 32578 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:	P	( ) Delete
Name:	CALVERT-REESE, DIANA L	
Address:	212 MCKINLEY STREET	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	VP	( ) Delete
Name:	BLANKENSHIP, JERRY	
Address:	119 MISTY VIEW LANE	
City-St-Zip:	ST. PETERS, MO 63376 US	
Title:	SEC	( ) Delete
Name:	WOLFE, TERRI	
Address:	1047 HICKORY AVE.	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	D-CH	( ) Delete
Name:	CHAMBERS, MARCUS D	
Address:	167 RED MAPLE WAY	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	D	( ) Delete
Name:	WHITTLE, JACQUELINE D	
Address:	4870 ORLIMAR STREET	
City-St-Zip:	CRESTVIEW, FL 32536 US	
Title:	D	( ) Delete
Name:	MINICH, LAURA V	
Address:	106 WAYNEL CIRCLE	
City-St-Zip:	FORT WALTON BEACH, FL 32548 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SEC	(X) Change ( ) Addition
Name:	RISEDEN, STEFANIE	
Address:	194 CONQUEST AVE.	
City-St-Zip:	CRESTVIEW, FL 32536 US	
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: DIANA L. CALVERT-REESE PRES 04/21/2008

Electronic Signature of Signing Officer or Director — Date