2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003520

Entity Name: HERD PROGRAM, INC.

FILED Apr 24, 2008 Secretary of State

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

11010 KEY LIME DRIVE CLERMONT, FL 34711

Current Mailing Address: New Mailing Address:

11010 KEY LIME DRIVE CLERMONT, FL 34711

FEI Number: 20-4696342 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:

PERRY, BARBARA G 10643 DENALI DRIVE CLERMONT, FL 34711 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:

Clashrania Giamahura of Danisharad Awart

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PERRY, BARBARA G
Address: 10643 DENALI DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: VD () Delete
Name: DUGGAR, BARBARA J
Address: 508 S. BLOXAM AVENUE
City-St-Zip: MINNEOLA, FL 34715

 Title:
 TD
 () Delete

 Name:
 BLANKENSHIP, DENNIS

 Address:
 2544 SQUAW CREEK

 City-St-Zip:
 CLERMONT, FL 34711

Title: SD () Delete Name: ROWE, KIRSTEN

Address: 16329 COOPERS HAWK AVENUE

City-St-Zip: CLERMONT, FL 34714

 Title:
 D
 () Delete

 Name:
 COGLEY, BETTY J

 Address:
 9559 PASO FINO LANE

 City-St-Zip:
 CLERMONT, FL 34711

Title: () Delete

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

Name: BLANKENSHIP, DENNIS Address: 2544 SQUAW CREEK City-St-Zip: CLERMONT, FL 34711

Title: SD (X) Change () Addition
Name: GEHRING, MARGERY
Address: 10404 LAKE LOUISA ROAD
City-St-Zip: CLERMONT, FL 34711

Title: TD (X) Change () Addition

Name: PERRY, BARBARA G Address: 10643 DENALI DRIVE City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change () Addition

Name: FRENCH, MARK

Address: 14716 GREEN VALLEY BLVD City-St-Zip: CLERMONT, FL 34711

Name: MERRIMAN, TINA
Address: 885 SKYRIDGE ROAD
City-St-Zip: CLERMONT, FL 34711

Title: D () Change (X) Addition

Name: HALOUSEK, MARY
Address: 5003 KELSO STREET
City-St-Zip: LEESBURG, FL 34748

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: BARBARA G. PERRY T 04/24/2008