

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005016

FILED
Aug 10, 2007
Secretary of State

Entity Name: HEART TO HEART COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

4301 NW 45TH TERRACE
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

2156 SW FEARS AVE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

4301 NW 45TH TERRACE
LAUDERDALE LAKES, FL 33319

New Mailing Address:

2156 SW FEARS AVE
PORT SAINT LUCIE, FL 34953

FEI Number: 20-4906851 **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:

DUKES, MICHELLE
4301 NW 45TH TERR.
LAUDERDALE LAKES, FL 33319 US

Name and Address of New Registered Agent:

DUKES, MICHELLE
2156 SW FEARS AVE
PORT SAINT LUCIE, FL 34953 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: MICHELLE DUKES

08/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUKES, MICHELLE
Address: 4301 NW 45 TERR.
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: CD () Delete
Name: CEASAR, MYRIAM
Address: 2181 NW 21 TERR.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: VD () Delete
Name: UPPERDITE, ROBNET
Address: 11540 NW 56 DR., 2-101
City-St-Zip: PARKLAND, FL 33076

Title: SD () Delete
Name: SPENCER, ALARIE
Address: 5055 NW 36 ST., #E315
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: D () Delete
Name: AYERS, GEORGE
Address: 44 S. PALM DR.
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUKES, MICHELLE
Address: 2156 SW FEARS AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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 DUKES

PD

08/10/2007

Electronic Signature of Signing Officer or Director

Date