2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000604

City-St-Zip:

TALLAHASSEE, FL 32312

FILED Jan 11, 2009 Secretary of State

Entity Nar	me: OPEN H	EARTS INTERNATIONAL, INC			
Current P	rincipal Plac	e of Business:	New Principal F	New Principal Place of Business:	
	NERMAN RD SSEE, FL 323	12			
Current M	lailing Addre	ss:	New Mailing Ac	New Mailing Address:	
	NERMAN RD SSEE, FL 323	12			
FEI Number:	: 59-1581904	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Addr	ess of New Registered Agent:	
KLEIN, THOMAS A ESQ 8511 BULL HEADLEY RD., STE 301 TALLAHASSEE, FL 32312 US			409 EĹ DESTINA	KLEIN, THOMAS A ESQ 409 EL DESTINADO DRIVE TALLAHASSEE, FL 32312 US	
	named entity of Florida.	submits this statement for the p	ourpose of changing its reg	stered office or registered agent, or both,	
SIGNATURE: THOMAS A. KLEIN, ESQ.				01/11/2009	
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CH	ANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D (BUZBEE, MICI 8894 WAUKEE MONTICELLO	ENAH HWY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	P (TILLOTSON, C 905 SHEATS F MONTICELLO	RD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V (KLEIN, THOM/ 409 DESTINAI TALLAHASSEI	OO DR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (BUZBEE, SUS 8894 WAUKEE MONTICELLO	ENAH HWY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	D (YOUNG, W.A.) Delete		(X) Change ()Addition IG, WILLET A JR.	

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.

City-St-Zip:

TALLAHASSEE, FL 32312

SIGNATURE: WILLET A. YOUNG, JR. 01/11/2009 D