

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000959

FILED
Mar 02, 2009
Secretary of State

Entity Name: HEARTLAND FOOD RESERVOIR, INC.

Current Principal Place of Business:

4206 MANDARIN ROAD
SEBRING, FL 33875

New Principal Place of Business:

7205 S. GEORGE BLVD
SEBRING, FL 33871

Current Mailing Address:

4206 MANDARIN ROAD
SEBRING, FL 33875

New Mailing Address:

P.O. BOX 7815
SEBRING, FL 33872

FEI Number: 20-8234466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOREWEGHE, FRANCIS R
4206 MANDARIN ROAD
SEBRING, FL 33875 US

Name and Address of New Registered Agent:

BOGDAN, CAROL A
7205 S. GEORGE BLVD.
SEBRING, FL 33871 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: CAROL A. BOGDAN

03/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VAN HOOREWEGHE, FRANCIS R
Address: 4206 MANDARIN ROAD
City-St-Zip: SEBRING, FL 33875

Title: DS () Delete
Name: HOLMES, MARY
Address: 101 MEDICAL CENTER AVENUE
City-St-Zip: SEBRING, FL 33870

Title: DT () Delete
Name: STEPHENSON, WILLIAM
Address: 198 ROWE STREET
City-St-Zip: AVON PARK, FL 33825

Title: D () Delete
Name: FOY, MARY
Address: 7205 S. GEORGE BLVD
City-St-Zip: SEBRING, FL 33875

Title: D (X) Delete
Name: ROBERTS, KEVIN
Address: 7205 S. GEORGE BLVD
City-St-Zip: SEBRING, FL 33875

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change () Addition
Name: STEPHENSON, WILLIAM
Address: 198 ROWE STREET
City-St-Zip: AVON PARK, FL 33825

Title: VCHR (X) Change () Addition
Name: FOY, MARY
Address: 7205 S. GEORGE BLVD.
City-St-Zip: SEBRING, FL 33871

Title: TRES (X) Change () Addition
Name: BOGDAN, CAROL
Address: 7205 S. GEORGE BLVD.
City-St-Zip: SEBRING, FL 33871

Title: SEC (X) Change () Addition
Name: HETHERTON, BILLIE A
Address: 108 TOMS ROAD
City-St-Zip: LORIDA, FL 33875

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: CAROL A. BOGDAN

TRES

03/02/2009

Electronic Signature of Signing Officer or Director

Date