

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010314

FILED
Apr 28, 2009
Secretary of State

Entity Name: HEARTBEAT BOUTIQUE CORPORATION

Current Principal Place of Business:

% SUSAN BOHNE
131 LANSING ISLAND DRIVE
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

% SUSAN BOHNE
131 LANSING ISLAND DRIVE
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, J. PATRICK
930 S. HARBOR CITY BOULEVARD
SUITE 505
MELBOURNE, FL 32901 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: D () Delete
Name: BUTLER, MELISSA
Address: 2250 SEA AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: ZAVITSANOS, STEPHANIE
Address: 648 HAWKSBILL ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete
Name: BOHNE, SUSAN
Address: 131 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: P () Delete
Name: BOHNE, SHANNON
Address: 131 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: VST () Delete
Name: ZAVITSANOS, ALYSANNA
Address: 648 HAWKSBILL ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: VST (X) Change () Addition
Name: BOHNE, SHANNON
Address: 131 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: P (X) Change () Addition
Name: ZAVITSANOS, ALYSANNA
Address: 648 HAWKSBILL ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

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: STEPHANIE ZAVITSANOS

DIRE

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date