2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004842

Entity Name: HEREAMI, INC.

FILED Feb 19, 2009 Secretary of State

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

645 FOURTH STREET NORTH

CHIPLEY, FL 32428 CHIPLEY, FL 32428

Current Mailing Address: New Mailing Address:

645 FOURTH STREET 645 FOURTH STREET NORTH

CHIPLEY, FL 32428 CHIPLEY, FL 32428

FEI Number: 26-2821491 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOOD, EDWARD W
2121-G KILLARNEY WAY
3653 CAGNEY DR.

TALLAHASSEE, FL 32309 US SUITE 202
TALLAHASSEE, FL 32309 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: 02/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 WOOD, III, EDWARD W
 Name:
 WOOD, III, EDWARD W

 Address:
 645 FOURTH STREET
 Address:
 645 FOURTH STREET NORTH

 City-St-Zip:
 CHIPLEY, FL 32428
 CHIPLEY, FL 32428

Title: D () Delete Title: D (X) Change () Addition Name: WOOD, LINDA Name: WOOD, LINDA

Address: 645 FOURTH STREET Address: 645 FOURTH STREET NORTH
City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: CHIPLEY, FL 32428

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 WOOD, EDWARD W
 Name:
 WOOD, EDWARD W

Address: 2121-G KILLARNEY WAY Address: 3653 CAGNEY DR., SUITE 202
City-St-Zip: TALLAHASSEE, FL 32309
City-St-Zip: TALLAHASSEE, FL 32309

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: EDWARD W. WOOD III D 02/19/2009