

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007069

FILED
Apr 06, 2009
Secretary of State

Entity Name: RENEWING HEARTS, INC.

Current Principal Place of Business:

7200 ALOMA AVE, SUITE E-1
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

7200 ALOMA AVE, SUITE E-1
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 26-3035251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EIDSON, RICK
7200 ALOMA AVE, SUITE E-1
WINTER PARK, FL 32792 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: EIDSON, RICK
Address: 401 RINGWOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: COUPLAND, SCOTT
Address: 1231 REFORMATION DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: OVERPECK, SCOTT
Address: 513 S DEVON RD
City-St-Zip: ORANGE, CA 92868

Title: D () Delete
Name: LOVE, SHERYL
Address: 404 GREENWOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EIDSON, RICKY
Address: 401 RINGWOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LOVE, SHERYL
Address: 404 RINGWOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Change (X) Addition
Name: EIDSON, ALICIA
Address: 401 RINGWOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Change (X) Addition
Name: DOUG, ARY
Address: 384 RINGWOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

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: RICKY L. EIDSON

D

04/06/2009

Electronic Signature of Signing Officer or Director

Date