

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007416

FILED
Mar 20, 2009
Secretary of State

Entity Name: OPERATION HUG-A-HERO, INC.

Current Principal Place of Business:

945 ETON DRIVE
JACKSONVILLE, NC 28546

New Principal Place of Business:

Current Mailing Address:

945 ETON DRIVE
JACKSONVILLE, NC 28546

New Mailing Address:

FEI Number: 26-3006655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAWEN, WADINE B
8311 101ST AVE N
LARGO, FL 33777 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: DIR () Delete
Name: DARNELL, NICOLE R
Address: 6024 HOT SPRING LANE
City-St-Zip: FREDERICKSBURG, VA 22407

Title: DIR () Delete
Name: DYAL, PATRICIA L
Address: 945 ETON DRIVE
City-St-Zip: JACKSONVILLE, NC 28546

Title: DIR () Delete
Name: PEACE, MELINDA
Address: 106 DUNWOODY DRIVE
City-St-Zip: JACKSONVILLE, NC 28546

Title: DIR () Delete
Name: BERG, LISA
Address: 12457 WHITE BLUFF RD
City-St-Zip: HUDSON, FL 34669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: DYAL, PATRICIA L
Address: 945 ETON DRIVE
City-St-Zip: JACKSONVILLE, NC 28546

Title: DIR (X) Change () Addition
Name: BERG, LISA M
Address: 12457 WHITE BLUFF RD
City-St-Zip: HUDSON, FL 34669

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

Title: TREA (X) Change () Addition
Name: PIPOLO, ALYSON
Address: 11645 BELLE HAVEN DR
City-St-Zip: NEW PORT RICHEY, FL 34654

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: LISA M BERG

DIR

03/20/2009

Electronic Signature of Signing Officer or Director

Date