

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011080

Entity Name: H.E.A.R.T.S ON INC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

237 SEACREST LANE
DLERAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

237 SEACREST LANE
DLERAY BEACH, FL 33444

New Mailing Address:

FEI Number: 26-3790178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEURENTIN, MATHIEU
237 SEACREST LANE
DLERAY BEACH, FL 33444 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: P () Delete
Name: MICHEY, FLEURANTIN J
Address: 237 SEACREST LANE
City-St-Zip: DLERAY BEACH, FL 33444

Title: P () Delete
Name: VICTOR, BERTRAND
Address: 237 SEACREST LANE
City-St-Zip: DLERAY BEACH, FL 33444

Title: T () Delete
Name: FLEURENTIN, DAVID
Address: 237 SEACREST LANE
City-St-Zip: DLERAY BEACH, FL 33444

Title: D () Delete
Name: FLEURENTIN, MATHIEU
Address: 237 SEACREST LANE
City-St-Zip: DLERAY BEACH, FL 33444

Title: D () Delete
Name: FLEURENTIN, NIXON ADVISOR
Address: 237 SEACREST LANE
City-St-Zip: DLERAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLEURANTIN, JEAN M PRESIDE
Address: 724E BLVD CHATELAINE
City-St-Zip: DLERAY BEACH, FL 33445

Title: V.P. (X) Change () Addition
Name: VICTOR, BERTRAND V.P.
Address: 237 SEACREST LANE
City-St-Zip: DLERAY BEACH, FL 33444

Title: T (X) Change () Addition
Name: FLEURENTIN, DAVID TREASUR
Address: 724E BLVD CHATELAINE
City-St-Zip: DLERAY BEACH, FL 33444

Title: P.R. (X) Change () Addition
Name: FLEURENTIN, MATHIEU P. REL
Address: 237 SEACREST LANE
City-St-Zip: DLERAY BEACH, FL 33444

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: FLEURANTIN, JEAN MICHEY

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date