

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000011021

**FILED**  
**Mar 21, 2010**  
**Secretary of State**

**Entity Name:** HAVE A HEART, INC.

**Current Principal Place of Business:**

7306 SARIMENTO PLACE  
DELRAY BEACH, FL 33446

**New Principal Place of Business:**

16402 BROOKFIELD ESTATES WAY  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

7306 SARIMENTO PLACE  
DELRAY BEACH, FL 33446

**New Mailing Address:**

2901 CLINT MOORE ROAD  
#420  
BOCA RATON, FL 33496

**FEI Number:** 94-3491079

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GREEN, JANICE  
7306 SARIMENTO PLACE  
DELRAY BEACH, FL 33446 US

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

GREEN, JANICE  
16402 BROOKFIELD ESTATES WAY  
DELRAY BEACH, FL 33446 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:**

03/21/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** GREEN, JANICE  
**Address:** 16402 BROOKFIELD ESTATES WAY  
**City-St-Zip:** DELRAY BEACH, FL 33446

**Title:** S  
**Name:** BROD, DEBORAH  
**Address:** 330 NE 86 STREET  
**City-St-Zip:** MIAMI, FL 33138

**Title:** T  
**Name:** GREEN, JANICE  
**Address:** 16402 BROOKFIELD ESTATES WAY  
**City-St-Zip:** DELRAY BEACH, FL 33446

I hereby 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 all other like empowered.

**SIGNATURE:** JANICE GREEN

PRES

03/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date