

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49682

FILED
Jan 13, 2012
Secretary of State

Entity Name: HEART TO HEART: A COMMUNITY CARE HOME, INC.

Current Principal Place of Business:

96 PLUMOSA AVENUE
CASSELBERRY, FL 32707 US

New Principal Place of Business:

643 MARINER WAY
ATAMONTE SPRINGS, FL 32701 US

Current Mailing Address:

P.O. BOX 150366
ALTAMONTE SPRINGS, FL 32715

New Mailing Address:

FEI Number: 59-3132600 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PARCELL, ELLEN T CEO
643 MARINER WAY
ALTAMONTE SPRINGS, FL 32701 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: CHAI
Name: HIGGINS, EDWARD J
Address: 338 W. MORSE BLVD. SUITE 200
City-St-Zip: WINTER PARK, FL 32789

Title: VICE
Name: RIDENOUR, KIMBERLY
Address: 2301 MAITLAND PARKWAY
City-St-Zip: MAITLAND, FL 32751 US

Title: SEC
Name: PEARCE, WARREN T
Address: 301 WHITE OAK CIRCLE
City-St-Zip: MAITLAND, FL 32794 US

Title: TRES
Name: PROVONOST, BRUCE
Address: 138 MARK DAVID BLVD.
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MEM
Name: SHEREE, DONALDSON
Address: 200 E. ROBINSON #9FLOOR
City-St-Zip: ORLANDO, FL 32801

Title: MEM
Name: SEARL, JASON
Address: 1127 SHOREWOOD DRIVE
City-St-Zip: ORLANDO, FL 32806

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: ELLEN THOMSON PARCELL

CEO

01/13/2012

Electronic Signature of Signing Officer or Director

Date