

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001398

FILED
Feb 22, 2006
Secretary of State

Entity Name: THE HEART OF A SERVANT, INC.

Current Principal Place of Business:

6144 NW 11TH STREET
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

1247 NW 55TH AVENUE
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSHALL, HAYDEN
1247 NW 55 AVE
LAUDERHILL, FL 33313 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: PD () Delete
Name: MARSHALL, HAYDEN
Address: 1247 NW 55 AVE
City-St-Zip: LAUDERHILL, FL 33313

Title: VD () Delete
Name: MARSHALL, SHERRIE
Address: 1247 NW 55 AVE
City-St-Zip: LAUDERHILL, FL 33313

Title: TD () Delete
Name: JOHNSON, BESSIE
Address: 630 CARVER DR
City-St-Zip: LAKE WELLS, FL 33853

Title: SD () Delete
Name: DOUGLAS, JENNIFER
Address: P.O. BOX 190702
City-St-Zip: FT LAUDERDALE, FL 33319

Title: D () Delete
Name: MC ROBERTS, EDWARD
Address: 5801 NW 19 ST
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: WILCOX, PATRICK
Address: 1632 SW 3 AVE
City-St-Zip: NORTH LAUDERDALE, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HAYDEN MARSHALL

PD

02/22/2006

Electronic Signature of Signing Officer or Director

Date