

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000141

FILED
Jan 17, 2005
Secretary of State

Entity Name: BETSY NAGELSEN'S A PLACE IN THE HEART, INC.

Current Principal Place of Business:

9600 MCCORMACK PLACE
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

9600 MCCORMACK PLACE
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 59-3357131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAGELSEN MCCORMACK, BETSY
9600 MCCORMACK PLACE
WINDERMERE, FL 34786 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: D () Delete
Name: NAGELSEN MCCORMACK, BETSY
Address: 9600 MCCORMACK PLACE
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: NAGELSEN, JAMES ROBERT JR.
Address: 420 CERROMAR COURT, #226
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: TROLLINGER, SARA E
Address: 1010 WEST 30TH STREET
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: GABRI, PATTY M
Address: 11059 SCHOONER WAY
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: SAHAG, WALKER
Address: 5 NORTHPOINTE COVE
City-St-Zip: JACKSON, MS 39211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: TROLLINGER, SARA E
Address: 2573 STONEVIEW ROAD
City-St-Zip: ORLANDO, FL 32806

Title: D (X) Change () Addition
Name: GABRI, PATTY M
Address: 9714 GREEN ISLAND COVE
City-St-Zip: WINDERMERE, FL 34786

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 Section 119.07(3)(i), 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: BETSY NAGELSEN MCCORMACK

D

01/17/2005

Electronic Signature of Signing Officer or Director

Date