## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000001094

Entity Name: HEART OF DAVID INTERNATIONAL, INC.

FILED May 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13621 GLYNSHEL DRIVE 1007 TUDHOPE COURT WINTER GARDEN, FL 34787 US SANFORD, FL 32773 US

Current Mailing Address: New Mailing Address:

PO BOX 680756 P O BOX 683425

ORLANDO, FL 32868 US ORLANDO, FL 32868 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ANDERSON, SHONDA S
13621 GLYNSHEL DRIVE
WINTER GARDEN, FL 34787 US
ANDERSON, SHONDA
1007 TUDHOPE COURT
SANFORD, FL 32773 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: SHONDA ANDERSON 05/01/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: ANDERSON, SHONDA Name: ANDERSON, SHONDA

Address: 13621 GLYNSHEL DRIVE Address: 1007 TUDHÓPE COURT City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: SANFORD, FL 32773

Title: VSTD ( ) Delete Title: VSTD (X) Change ( ) Addition Name: ADNERSON, RALPH E Name: ANDERSON, RALPH

Address: 13621 GLYNSHEL DRIVE Address: 1007 TUDHOPE COURT City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: SANFORD, FL 32773

Title: STD ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 ANDERSON, RALPH E
 Name:
 SETTLES, RHONDA K

 Address:
 776 DESOTO STREET
 Address:
 830 BLUE STREET

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 BONNE TERRE, MO 63628

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SETTLES, RHONDA K
 Name:

 Address:
 1240 S. VINELAND ROAD, U1
 Address:

 City-St-Zip:
 WINTER GARDEN, FL 34787
 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: SHONDA ANDERSON P 05/01/2005