

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001094

FILED
Apr 30, 2006
Secretary of State

Entity Name: HEART OF DAVID INTERNATIONAL, INC.

Current Principal Place of Business:

1007 TUDHOPE COURT
SANFORD, FL 32773 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 683425
ORLANDO, FL 32868 US

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:

ANDERSON, SHONDA
1007 TUDHOPE COURT
SANFORD, FL 32773 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: ANDERSON, SHONDA
Address: 1007 TUDHOPE COURT
City-St-Zip: SANFORD, FL 32773

Title: VSTD () Delete
Name: ANDERSON, RALPH
Address: 1007 TUDHOPE COURT
City-St-Zip: SANFORD, FL 32773

Title: D () Delete
Name: SETTLES, RHONDA K
Address: 830 BLUE STREET
City-St-Zip: BONNE TERRE, MO 63628

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:

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: RALPH ANDERSON

VP

04/30/2006

Electronic Signature of Signing Officer or Director

Date