

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000001094

FILED  
Sep 10, 2003  
Secretary of State

**Entity Name:** HEART OF DAVID INTERNATIONAL, INC.

**Current Principal Place of Business:**

1146 E PLANT STREET  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

776 DESOTO STREET  
CLERMONT, FL 34711 US

**Current Mailing Address:**

PO BOX 680756  
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:**

FOWLER, JOSHUA P  
203 LAURENBURG LANE  
OCOE, FL 34761

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

ANDERSON, SHONDA S  
PO BOX 683425  
ORLANDO, FL 32868

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 S. ANDERSON

09/10/2003

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FOWLER, JOSHUA  
Address: 203 LAURENBURG LN.  
City-St-Zip: OCOEE, FL 34761

Title: VPD ( ) Delete  
Name: KING, SHONDA  
Address: 5138 PISA DR., APT 628  
City-St-Zip: ORLANDO, FL 32810

Title: SD ( ) Delete  
Name: FOWLER, ASHLEY K  
Address: 203 LAURENBURG LN.  
City-St-Zip: OCOEE, FL 34761

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ANDERSON, SHONDA S  
Address: 776 DESOTO STREET  
City-St-Zip: CLERMONT, FL 34711

Title: VPD (X) Change ( ) Addition  
Name: FOWLER, JOSHUA  
Address: 13949 FOX GLOVE STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: STD (X) Change ( ) Addition  
Name: ANDERSON, RALPH E  
Address: 776 DESOTO STREET  
City-St-Zip: CLERMONT, FL 34711

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 S. ANDERSON

PRES

09/10/2003

Electronic Signature of Signing Officer or Director

Date