

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002824

FILED
Feb 24, 2004
Secretary of State**Entity Name:** H.E.R.O.E.S., INC.**Current Principal Place of Business:**424 S 3RD STREET
UNIT B
JACKSONVILLE BEACH, FL 32250**New Principal Place of Business:****Current Mailing Address:**PO BOX 49099
JACKSONVILLE BEACH, FL 32240**New Mailing Address:****FEI Number:** 59-3382916**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SORRELL, MARY C ESQ
2275 ATLANTIC BOULEVARD
NEPTUNE BEACH, FL 32266 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: HIONIDES, CHRIS
Address: 47 11TH STREET
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VTD () Delete
Name: BROWNING, BELINDA
Address: 1167 3RD AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: STONE, NANCY
Address: 1656 LINKSIDE CT N
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: T () Delete
Name: MARCELLO, RALPH
Address: 152 WATER OAK DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: ED () Delete
Name: FORSTER, GREGORY
Address: 829 FIRST ST SOUTH #2F
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VTD (X) Change () Addition
Name: CANDICE, MCCLELLAN
Address: 424 B THIRD STREET SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D (X) Change () Addition
Name: TALLEY, TRACY
Address: 424 B SOUTH THIRD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

Title: ED (X) Change () Addition
Name: FORSTER, CINDY
Address: 424 B SOUTH THIRD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: CINDY FORSTER

ED

02/24/2004

Electronic Signature of Signing Officer or Director

Date