

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000002824

FILED  
May 14, 2008  
Secretary of State

Entity Name: H.E.R.O.E.S., INC.

## Current Principal Place of Business:

2444 MAYPORT RD.  
#11  
ATLANTIC BEACH, FL 32233

## New Principal Place of Business:

108 N 6TH AVE  
JACKSONVILLE BEACH, FL 32250

## Current Mailing Address:

PO BOX 49099  
JACKSONVILLE BEACH, FL 32240

## New Mailing Address:

PO BOX 51321  
JACKSONVILLE BEACH, FL 32240

FEI Number: 59-3382916      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:

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: MARY SORRELL

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TP      ( ) Delete  
Name: HIONIDES, CHRIS  
Address: 47 11TH STREET  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: ED      ( ) Delete  
Name: FORSTER, CINDY  
Address: 2444 MAYPORT RD. #1  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: ST      ( ) Delete  
Name: TRENDDEL, MARO  
Address: 2233 SEMINOLE RD, # 33  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP      (X) Change ( ) Addition  
Name: SARICH, MARGARET  
Address: 101 BROKEN POTTERY DR  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: ST      (X) Change ( ) Addition  
Name: NELSON, MELISSA J  
Address: 352 7TH AVE  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: ED      ( ) Change (X) Addition  
Name: MORGAN SPIRES, MELINDA L  
Address: 1701 THE GREENS WAY #2024  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby certify that the information supplied with this filing does not qualify 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: MELINDA MORGAN SPIRES

ED

05/14/2008

Electronic Signature of Signing Officer or Director

Date