

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90231 019 ****61.25

DOCUMENT # N96000002824

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



Principal Place of Business
**424 S 3RD STREET
UNIT 8
JACKSONVILLE BEACH FL 32250**

Mailing Address
**PO BOX 330108
ATLANTIC BEACH FL 32233-0108**



2. Principal Place of Business
424 S. Third St

3. Mailing Address
PO Box 49099

Suite, Apt. #, etc.
Unit B

City & State
Jacksonville Beach FL

City & State
Jacksonville Beach, FL

Zip
32250

Country
USA

Zip
32240-9099

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3382916**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**SORRELL, MARY C ESQ
2275 ATLANTIC BOULEVARD
NEPTUNE BEACH FL 32266**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Applicable)

City, State, and Zip Code
Jacksonville Beach, FL 32250

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [Signature] DATE [Date]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIONIDES, NADIA		NAME	Chris Hionides	
STREET ADDRESS	47 11TH STREET		STREET ADDRESS	47 11th street	
CITY-ST-ZIP	ATLANTIC BEACH FL 32233		CITY-ST-ZIP	Atlantic Beach, FL 32233	
TITLE	STD	<input checked="" type="checkbox"/> Delete	TITLE	STD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HIONIDES, CHRIS		NAME	Belinda Browning	
STREET ADDRESS	47 11TH STREET		STREET ADDRESS	1167 3rd AVE N.	
CITY-ST-ZIP	ATLANTIC BEACH FL 32233		CITY-ST-ZIP	Jacksonville Beach FL 32250	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STONE, NANCY		NAME		
STREET ADDRESS	1656 LINKSIDE CT N		STREET ADDRESS		
CITY-ST-ZIP	ATLANTIC BEACH FL 32233		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARPENTER, EMMA LEE		NAME	Ralph Marcello	
STREET ADDRESS	73 FISHERMANS COVE RD		STREET ADDRESS	152 Water Oak Dr	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		CITY-ST-ZIP	Ponte Vedra Beach FL 32082	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	Executive Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DICHT, JANICE		NAME	Gregory Forster	
STREET ADDRESS	7805 GAYL RD		STREET ADDRESS	829 First St. South #2F	
CITY-ST-ZIP	CHELtenham PA 19012		CITY-ST-ZIP	Jacksonville Beach, FL 32250	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] **Gregory Forster** **2/11/03** **904-247-6033**

CR2E037 (10/02)