

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006251

FILED  
Jan 06, 2004  
Secretary of State

**Entity Name:** FLORIDA HEARTLAND HERITAGE FOUNDATION, INC.

**Current Principal Place of Business:**

950 COUNTY ROAD 29  
LAKE PLACID, FL 33852 US

**New Principal Place of Business:**

**Current Mailing Address:**

950 COUNTY ROAD 29  
LAKE PLACID, FL 33852 US

**New Mailing Address:**

**FEI Number:** 65-0778691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEIN, TERESA  
1339 LAKE CLAY DR.  
LAKE PLACID, FL 33852 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: MUNDHENK, DAVID  
Address: 351 CATFISH CREEK DR  
City-St-Zip: LAKE PLACID, FL 33852

Title: ST ( ) Delete  
Name: HOLMES, RONALD N  
Address: 37 WINDWARD DR  
City-St-Zip: LAKE PLACID, FL 33852

Title: D ( ) Delete  
Name: GENTRY, DORIS  
Address: 650 E CORNELL  
City-St-Zip: AVON PARK, FL 33825

Title: D ( ) Delete  
Name: PHYPERS, CAROLYN  
Address: 1812 LAKE CLAY DR  
City-St-Zip: LAKE PLACID, FL 33852

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

Title: PD (X) Change ( ) Addition  
Name: MUNDHENK, DAVID  
Address: 351 CATFISH CREEK DR  
City-St-Zip: LAKE PLACID, FL 33852 HI

Title: ST (X) Change ( ) Addition  
Name: HOLMES, RONALD N  
Address: 37 WINDWARD DR  
City-St-Zip: LAKE PLACID, FL 33852 HI

Title: D (X) Change ( ) Addition  
Name: GENTRY, DORIS  
Address: 650 E CORNELL  
City-St-Zip: AVON PARK, FL 33825 HI

Title: D (X) Change ( ) Addition  
Name: PHYPERS, CAROLYN  
Address: 1812 LAKE CLAY DR  
City-St-Zip: LAKE PLACID, FL 33852 HI

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: DORIS GENTRY

PRES

01/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date