

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008908

Entity Name: HEALING HEART, INC.

FILED  
Mar 11, 2009  
Secretary of State

## Current Principal Place of Business:

180 NEPTUNE DR  
HYPOLUXO, FL 33462 US

## New Principal Place of Business:

208 NE 3RD STREET  
BOYNTON BEACH, FL 33435 US

## Current Mailing Address:

180 NEPTUNE DR  
HYPOLUXO, FL 33462 US

## New Mailing Address:

FEI Number: 65-0986794      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KELLER, BRUCE A  
2375 NE 195TH STREET  
NORTH MIAMI BEACH, FL 33180 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete  
Name: KELLER, NANCY  
Address: 180 NEPTUNE DR  
City-St-Zip: HYPOLUXO, FL 33462

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY KELLER

PTSD

03/11/2009

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

\_\_\_\_\_  
Date