

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90138 050 ***150.00

DOCUMENT # P01000013152

1. Entity Name

EXPRESSIONS FROM THE HEART, INC.

Principal Place of Business

**7319 SANDS COVE COURT, STE 10
WINTER PARK FL 32792**

Mailing Address

**7319 SANDS COVE COURT, STE 10
WINTER PARK FL 32792**

2. Principal Place of Business

1244 ROYAL OAK DRIVE

Suite, Apt. #, etc.

3. Mailing Address

1244 ROYAL OAK DRIVE

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State WINTER SPRINGS FL		City & State WINTER SPRINGS FL		4. FEI Number 59-3719238	Applied For <input type="checkbox"/> Not Applicable
Zip 32708-4309	Country USA	Zip 32708-4309	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**HELENTAL, KAREN A
7319 SANDS COVE COURT, STE 10
WINTER PARK FL 32792**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
1244 ROYAL OAK DRIVE
City
WINTER SPRINGS FL Zip Code
32708-4309

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.

SIGNATURE **Karen A. Helenthal** **KAREN A HELENTAL** **04-30-02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROBERTSON, BELINDA A 7319 SANDS COVE COURT, STE 10 WINTER PARK FL 32792 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1244 ROYAL OAK DRIVE WINTER SPRINGS, FL 32708-4309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HELENTAL, KAREN A 7319 SANDS COVE COURT, STE 10 WINTER PARK FL 32792 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1244 ROYAL OAK DRIVE WINTER SPRINGS, FL 32708-4309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Karen A. Helenthal** **KAREN A HELENTAL** **04-30-02** **407-366-5359**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)