

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071683

Entity Name: HEART OF ADOPTIONS, INC.

FILED  
Jan 23, 2008  
Secretary of State

## Current Principal Place of Business:

418 W. PLATT STREET  
TAMPA, FL 33606

## New Principal Place of Business:

## Current Mailing Address:

418 W. PLATT STREET  
TAMPA, FL 33606

## New Mailing Address:

FEI Number: 59-3742329

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TATE, MARK T  
418 W. PLATT STREET  
TAMPA, FL 33606 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: P ( ) Delete  
Name: TATE, JEANNE T  
Address: 418 W. PLATT STREET  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: TATE, MARK T  
Address: 418 W. PLATT STREET  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: BARKSDALE, DANIELLE  
Address: 418 W. PLATT STREET  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: BARNO, BRIGETTE  
Address: 418 W. PLATT STREET  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: STEWART, DANEILLE  
Address: 9180 GALLERIA COURT STE 700  
City-St-Zip: NAPLES, FL 34109

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JEANNE T TATE

P

01/23/2008

Electronic Signature of Signing Officer or Director

Date