2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000090292

Entity Name: HEART AND SOUL HEALTHY CATERING CO.

FILED Sep 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6844 W. CO. HWY 30-A

SANTA ROSA BEACH, FL 32459

Current Mailing Address:

New Mailing Address:

6844 W. CO. HWY 30-A SANTA ROSA BEACH, FL 32459

FEI Number: 20-5132139 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WISE, GARY CADENHEAD, CHRIS 209 CHASE RUN 5 CALHOUN

MIRAMAR BEACH, FL 32550 US PH 5
DESTIN, FL 32541 US

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: CHRIS CADENHEAD 09/05/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ANDERSON, MICHELLE ANDERSON, MICHELLE L Name: Name: 6844 W. CO. HWY 30-A 6844 W. CO. HWY 30-A Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

 Title:
 () Delete
 Title:
 VP () Change (X) Addition

 Name:
 Name:
 COULTER, WENDY M

 Address:
 Address:
 122 SHOREBIRD DR #812

 City-St-Zip:
 City-St-Zip:
 SANTA ROSA BEACH, FL 32459

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: MICHELLE ANDERSON PT 09/05/2007