

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050920

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: FROM THE HEART MONOGRAMS & UNIQUE GIFTS, INC

## Current Principal Place of Business:

1424 HIGHLAND AVE  
MELBOURNE, FL 32935 US

## New Principal Place of Business:

1428 HIGHLAND AVE  
MELBOURNE, FL 32935 US

## Current Mailing Address:

1424 HIGHLAND AVE  
MELBOURNE, FL 32935 US

## New Mailing Address:

1428 HIGHLAND AVE  
MELBOURNE, FL 32935 US

FEI Number: 26-2652146

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BELL, CATHERINE  
525 IMPERIAL AVE  
MELBOURNE, FL 32935 US

## Name and Address of New Registered Agent:

CONRADIS, MADISON  
525 IMPERIAL AVE  
MELBOURNE, FL 32935 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: MADISON CONRADIS

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVP ( ) Delete  
Name: BELL, CATHERINE  
Address: 525 IMPERIAL AVE  
City-St-Zip: MELBOURNE, FL 32935

Title: S ( ) Delete  
Name: CONRADIS, CHRISTINE  
Address: 525 IMPERIAL AVE  
City-St-Zip: MELBOURNE, FL 32935

Title: T (X) Delete  
Name: CONRADIS, MADISON  
Address: 525 IMPERIAL AVE  
City-St-Zip: MELBOURNE, FL 32935

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CONRADIS, MADISON  
Address: 525 IMPERIAL AVE  
City-St-Zip: MELBOURNE, FL 32935

Title: VP (X) Change ( ) Addition  
Name: CONRADIS, CHRISTINE  
Address: 525 IMPERIAL AVE  
City-St-Zip: MELBOURNE, FL 32935

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: MADISON CONRADIS

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date