## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000067678

Entity Name: HEARTLAND BANCSHARES, INC.

FILED Jan 16, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 320 U.S. HIGHWAY 27 NORTH SEBRING, FL 33870 **Current Mailing Address: New Mailing Address:** 320 U.S. HIGHWAY 27 NORTH SEBRING, FL 33870 FEI Number: 65-0854929 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: HARRIS, BERT J III 401 DAL HALL BLVD LAKE PLACID, FL 33852 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CLINARD, JAMES C Name: Name: 106 MAR-BET DRIVE Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: Title: Title: () Delete () Change () Addition BIBLE, ANDREW S Name: Name: 3705 GOLFVIEW RD Address: Address: SEBRING, FL 33875 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition HARRIS, BERT J Name: Name: 401 DAL HALL BLVD Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: Title: () Delete Title: () Change () Addition WELLS, LAWRENCE B Name: Name: Address: 309 U.S. 27 SOUTH Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: Title: Title: ( ) Delete () Change () Addition WATTERS, MALCOLM C JR. Name: Name: 2220 COUNTY ROAD 17 NORTH Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: Title: () Delete Title: () Change () Addition NAGIB, ISSAC Name: Name: 705 NE LAKEVIEW DRIVE Address: Address: City-St-Zip: City-St-Zip: SEBRING, FL 33870

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREW S. BIBLE S 01/16/2007