

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000067678

FILED
Jan 26, 2008
Secretary of State

Entity Name: HEARTLAND BANCSHARES, INC.

Current Principal Place of Business:

320 U.S. HIGHWAY 27 NORTH
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

320 U.S. HIGHWAY 27 NORTH
SEBRING, FL 33870

New Mailing Address:

FEI Number: 65-0854929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, BERT J III
401 DAL HALL BLVD
LAKE PLACID, FL 33852 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: PD () Delete
Name: CLINARD, JAMES C
Address: 106 MAR-BET DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: ST () Delete
Name: BIBLE, ANDREW S
Address: 3705 GOLFVIEW RD
City-St-Zip: SEBRING, FL 33875

Title: D () Delete
Name: HARRIS, BERT J
Address: 401 DAL HALL BLVD
City-St-Zip: LAKE PLACID, FL 33852

Title: D () Delete
Name: WELLS, LAWRENCE B
Address: 309 U.S. 27 SOUTH
City-St-Zip: LAKE PLACID, FL 33852

Title: D () Delete
Name: WATTERS, MALCOLM C JR.
Address: 2220 COUNTY ROAD 17 NORTH
City-St-Zip: LAKE PLACID, FL 33852

Title: D () Delete
Name: NAGIB, ISSAC
Address: 705 NE LAKEVIEW DRIVE
City-St-Zip: SEBRING, FL 33870

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
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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: ANDREW S BIBLE

S

01/26/2008

Electronic Signature of Signing Officer or Director

Date