2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# P99000045642

Entity Name: HEARTLAND FORECLOSURES, INC.

Current Principal Place of Business:

310 E. MAIN ST.
BARTOW, FL 33830

New Principal Place of Business:

444 GATES AVENUE
LAKE HAMILTON, FL 33851

Current Mailing Address:

% NEAL L. O'TOOLE PA
PO BOX 50
BARTOW, FL 33831

New Mailing Address:

DAVID M. BLACK
PO BOX 24
LAKE HAMILTON, FL 33851

FEI Number: 59-3655528 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURPHY, FREDERICK J JR.
245 SOUTH CENTRAL AVENUE
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

BLACK, DAVID M
444 GATES AVENUE
LAKE HAMILTON, FL 33851 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: DAVID M. BLACK 01/28/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: O'TOOLE, NEAL L
Address: 310 E. MAIN ST.
City-St-Zip: BARTOW, FL 33830

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition
Name: BLACK, DAVID M
Address: 444 GATES AVEUNE
City-St-Zip: LAKE HAMILTON, FL 33851

Title: VP ( ) Change (X) Addition
Name: BLACK, WILLIAM G
Address: 2920 CHICKASAW CIRCLE
City-St-Zip: HAINES CITY, FL 33844

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: DAVID MICHEAL BLACK O/D 01/28/2008
Electronic Signature of Signing Officer or Director Date