

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004391

Entity Name: HEAVENLY HOOFS, INC.**Current Principal Place of Business:**4651 RUMMELL ROAD
ST CLOUD, FL 34771-9668**Current Mailing Address:**4651 RUMMELL ROAD
ST CLOUD, FL 34771-9668 US**FEI Number:** 13-4205662**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SANCHEZ, THOMASA
1631 EAST VINE STREET, SUITE 300
KISSIMMEE, FL 34744 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**Officer/Director Detail :**

Title	CEO
Name	SANCHEZ, THOMASA
Address	2800 VICKIE COURT
City-State-Zip:	KISSIMMEE FL 34744

Title	DIRECTOR
Name	TOMPKINS, THOMAS
Address	1731 BOGGY CREEK ROAD
City-State-Zip:	KISSIMMEE FL 34744

Title	TREASURER
Name	DIXON, KENNETH G
Address	1627 EAST VINE STREET, E
City-State-Zip:	KISSIMMEE FL 34744

Title	DIRECTOR
Name	WHITE, THOMAS E
Address	4717 OLD CANOE CREEK RD.
City-State-Zip:	ST. CLOUD FL 34769

Title	SECRETARY
Name	ACKLEY, RAJIA
Address	1503 SUNSET POINTE PLACE
City-State-Zip:	KISSIMMEE FL 34744

Title	CHAIRMAN
Name	MILLER, MARK
Address	11105 AUTUMN LANE
City-State-Zip:	CLERMONT FL 34711

Title	DIRECTOR
Name	SANCHEZ, DOMINGO
Address	2800 VICKIE COURT
City-State-Zip:	KISSIMMEE FL 34744

Title	DIRECTOR
Name	GIBSON, SARAH DR.
Address	13535 NEMOURS PARKWAY
City-State-Zip:	ORLANDO FL 32827

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMASA SANCHEZ

CEO

04/10/2018

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VC
Name ROBERTS, CHARLES JR.
Address 6850 LAKE NONA BOULEVARD
City-State-Zip: ORLANDO FL 32827

Title DIRECTOR
Name DAVIDSON, ERIC
Address 436 OREGON AVENUE
City-State-Zip: ST. CLOUD FL 34769

Title DIRECTOR
Name KNIGHT, BETH
Address 1245 HANCOCK CIRCLE
City-State-Zip: ST. CLOUD FL 34769

Title DIRECTOR
Name REICH, SHAYNA
Address 12121 KIRBY SMITH ROAD
City-State-Zip: ORLANDO FL 32832

Title DIRECTOR
Name LIPPERT, SCOTT
Address 317 WILDROSE AVENUE
City-State-Zip: SAN ANTONIO TX 78209

Title DIRECTOR
Name BRUCE, DEREK
Address 200 S. ORANGE AVENUE, SUITE 1400
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name MCDONALD, ROBERT (BOB)
Address 5378 ISLEWORTH COUNTRY CLUB DRIVE
City-State-Zip: WINDERMERE FL 34786-8924

Title DIRECTOR
Name JEANNIN, WENDI
Address 4423 ALBRITTON RD
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR
Name KETCHUM, RAYELYNNE
Address 2900 WAGON COURT
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR
Name SCHOOLFIELD, CHERYL
Address 101 PARK PLACE BLVD.
City-State-Zip: KISSIMMEE FL 34741

Title DIRECTOR
Name DIPIETRE, JACKIE
Address 641 WOODBURY ROAD
City-State-Zip: GLENDALE CA 91206

Title DIRECTOR
Name SEAY, GEORGE
Address 325 N. ST. PAUL STREET, SUITE 3500
City-State-Zip: DALLAS TX 75201

Title DIRECTOR
Name REY, ALEX
Address 976 LAKE BALDWIN LANE, APT. 102
City-State-Zip: ORLANDO FL 32814

Title COO
Name PHARO, KELLI
Address 2839 PONKAN MEADOW DRIVE
City-State-Zip: APOPKA FL 32712