

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000001300

**Entity Name:** HEATHROW MODERN MOMS, INC.**Current Principal Place of Business:**209 W RIDGEWOOD CT  
LONGWOOD, FL 32779**Current Mailing Address:**209 W RIDGEWOOD CT  
LONGWOOD, FL 32779 US**FEI Number:** 46-2337501**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CANNON, REBECCA J  
209 W RIDGEWOOD CT  
LONGWOOD, FL 32779 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 VP, ADMINISTRATION  
Name HOOD, BREHAN  
Address 1381 STANFIELD COVE  
City-State-Zip: HEATHROW FL 32746Title SECRETARY  
Name PAPARELLA, KATHRYN  
Address 849 ASHBROOKE CT  
City-State-Zip: HEATHROW FL 32746Title PRESIDENT  
Name JONES, LINDSAY  
Address 861 PADDINGTON TERR  
City-State-Zip: HEATHROW FL 32746Title TREASURER  
Name DORIAN, MAGALLY  
Address 1187 CHESSINGTON CIR  
City-State-Zip: HEATHROW FL 32746Title VP, MEMBERSHIP  
Name GREBLER, KARA  
Address 1555 BAYWATER COURT  
City-State-Zip: HEATHROW FL 32746Title OTHER, ADVISOR  
Name CANNON, REBECCA  
Address 209 W RIDGEWOOD COURT  
City-State-Zip: LONGWOOD FL 32779

*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:** REBECCA CANNON**ADVISOR****04/26/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date