

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 858299

FILED  
May 06, 2010  
Secretary of State

**Entity Name:** HIS MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

HIS MINISTRIES INTERNATIONAL  
213 ZACHARY WADE STREET  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

HIS MINISTRIES INTERNATIONAL  
P.O. BOX 1833  
LYNN HAVEN, FL 32444

**New Mailing Address:**

**FEI Number:** 23-7394628      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

FOWLER, CHARLES A JR.  
213 ZACHARY WADE STREET  
WINTER GARDEN, FL 34787      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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FOWLER, CHARLES A.L. JR.  
Address: 213 ZACHARY WADE STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VD  
Name: FOWLER, FAITH SUZANNE  
Address: 213 ZACHARY WADE STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VD  
Name: MILLER, CHARM S  
Address: P.O. BOX 1833  
City-St-Zip: LYNN HAVEN, FL 32444

Title: SD  
Name: WATKINS, JAMES U JR.  
Address: 1827 FLAGG AVENUE  
City-St-Zip: PANAMA CITY, FL 32407

Title: D  
Name: MILLER, BRIAN D  
Address: P.O. BOX 1833  
City-St-Zip: LYNN HAVEN, FL 32444

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: CHARM S. MILLER

VD

05/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date