

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 02, 2011
Secretary of State

Entity Name: HOUSE OF MERCY INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

1109 N. PARSONS AVE
STE 101
BRANDON, FL 33510

New Principal Place of Business:

701 N. PARSONS AVE
SUITE B
BRANDON, FL 33510

Current Mailing Address:

P.O. BOX 291093
TAMPA, FL 33687

New Mailing Address:

FEI Number: 32-0019010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOVER, NANCY M REV
729 BERRY BRAMBLE DRIVE
BRANDON, FL 33510 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

OFFICERS AND DIRECTORS:

Title: V
Name: GLOVER, SAM MIN
Address: 729 BERRY BRAMBLE DR
City-St-Zip: BRANDON, FL 33510

Title: D
Name: CROCKER, TRACEY REV.
Address: 8611 N. 11TH STREET
City-St-Zip: TAMPA, FL 33604

Title: D
Name: BRYD, WILLIAM
Address: 13230 PIKE LAKE DR
City-St-Zip: RIVERVIEW, FL 33579

Title: DS
Name: WILLIAM, KENNESHIA
Address: 13029 TRIBUNE DR
City-St-Zip: RIVERVIEW, FL 33569

Title: D
Name: CROCKER, CORY W DR.
Address: 8611 N. 11TH STREET
City-St-Zip: TAMPA, FL 33604

Title: D
Name: KING, GWEN DR
Address: 1309 LOUISANNA
City-St-Zip: PLANT CITY, FL 33566

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: NANCY M. GLOVER

REV

04/02/2011

Electronic Signature of Signing Officer or Director

Date