

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009444

FILED
Mar 12, 2008
Secretary of State

Entity Name: A MATTER OF HEART MINISTRIES, INC.

Current Principal Place of Business:

10860 NW 18 CT
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

10860 NW 18 CT
PLANTATION, FL 33322

New Mailing Address:

FEI Number: 30-0261648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, GLORIA W
10860 NW 18 CT
PLANTATION, FL 33322 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: CEO () Delete
Name: DIXON, GLORIA W
Address: 10860 NW 18 CT
City-St-Zip: PLANTATION, FL 33322

Title: PRES () Delete
Name: WOMACK, LINDA M
Address: 2811 SOMERSET DRIVE #212
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: S () Delete
Name: WORTHY, KAREN E
Address: PO BOX 681553
City-St-Zip: MIAMI, FL 33168

Title: D () Delete
Name: KELLY, LYNETTE M
Address: 5400 SW 25 CT
City-St-Zip: W HOLLYWOOD, FL 33032

Title: VP () Delete
Name: HAWKINS, MICHAEL
Address: 411 SW 14 ST
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: TRES () Delete
Name: SOLOMON, GLORIA
Address: 4557 N.W. 3 STREET
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: NJIE, CCELIA V
Address: 4883 NW 5TH CT.
City-St-Zip: PLANTATION, FL 33313

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: WOMACK, KATHY L
Address: 1749 NW 36 TERR
City-St-Zip: FORT LAUDERDALE, FL 33311

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

SIGNATURE: GLORIA W. DIXON

CEO

03/12/2008

Electronic Signature of Signing Officer or Director

Date