

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008825

Entity Name: HIS OPEN ARMS, INC.

Current Principal Place of Business:

1305 CLEARVIEW PKWY
A
METAIRIE, LA 70001

FILED
May 03, 2018
Secretary of State
CC0881813698

Current Mailing Address:

P.O. BOX 11023
NEW ORLEANS, LA 70181 US

FEI Number: 38-3692458

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARROW'S TAX SERVICE
948 S. HWY 29
CANTONMENT, FL 32533 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 PRES
Name ENGVALL, DONNA M
Address P.O. BOX 11023
City-State-Zip: NEW ORLEANS LA 70181

Title DIRECTOR
Name MEAD, SUSAN
Address 425 WESTWOOD DR.
City-State-Zip: MARYVILLE TN 37803

Title D
Name FELDSCHAU, RANDY
Address 2350 EASTEX FWY.
City-State-Zip: BEAUMONT TX 77703

Title DIRECTOR
Name OBERKIRCHER, JIM
Address 3322 HIDEAWAY LN
City-State-Zip: SPRING TX 77388

Title DIRECTOR
Name FREEMAN, ANTHONY R
Address 4045 HUGO DR
City-State-Zip: MARRERO LA 70072

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: DONNA ENGVALL

PRESIDENT

05/03/2018

Electronic Signature of Signing Officer/Director Detail

Date