#### 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: MELISSA MOSES

Electronic Signature of Signing Officer/Director Detail

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.

Officer/Director Detail :							
	Title	D	Title	DIRECTOR			
	Name	MOSES, MELISSA	Name	HUNDLEY, F			
	Address	7367 TILLMAN DRIVE	Address	751 PINE CH			
	City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	WELLINGTO			
	Title	DIRECTOR					

SIGNATURE: Electronic Signature of Registered Agent

	Title	D	Title	DIRECTOR		
	Name	MOSES, MELISSA	Name	HUNDLEY, PAIGE		
	Address	7367 TILLMAN DRIVE	Address	751 PINE CHASE COURT		
	City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	WELLINGTON FL 33414		
	Title	DIRECTOR				
	Name	MORAN, KARINA				
	Address	4688 PINEMORE LANE				
	City-State-Zip:	LAKE WORTH FL 33463				

### Certificate of Status Desired: No

FILED Apr 30, 2014 Secretary of State CC4759773348

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N12000011404

Entity Name: HEALING HEARTS RECOVERY MINISTRY INC.

### **Current Principal Place of Business:**

7367 TILLMAN DRIVE LAKE WORTH. FL 33467

## **Current Mailing Address:**

7367 TILLMAN DRIVE LAKE WORTH. FL 33467

# **FEI Number: APPLIED FOR**

## Name and Address of Current Registered Agent:

MOSES, MELISSA 7367 TILLMAN DRIVE LAKE WORTH, FL 33467 US

Date

Date

DIRECTOR

04/30/2014