

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000574

FILED
Feb 23, 2005
Secretary of State

Entity Name: HIGHER HEIGHTS MINISTRIES, INC.

Current Principal Place of Business:

7201 ARLINGTON EXPRESSWAY, #47
JACKSONVILLE, FL 32211

New Principal Place of Business:

6103 WINDING BRIDGE DRIVE
JACKSONVILLE, FL 32277

Current Mailing Address:

P.O. BOX 8702
JACKSONVILLE, FL 32239 US

New Mailing Address:

FEI Number: 59-3636839 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGHOWER-ROBINSON, RHONDA
7528 ARLINGTON EXPRESSWAY
#306
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

HIGHOWER-ROBINSON, RHONDA
1304 MAGNOLIA PLACE
JACKSONVILLE, FL 32211 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

02/23/2005

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ROBINSON, RHONDA H
Address: 7528 ARLINGTON EXPRESSWAY #306
City-St-Zip: JACKSONVILLE, FL 32211

Title: VD () Delete
Name: SUMLAR, LAMESHIA
Address: 7201 ARLINGTON EXPRESSWAY, #47
City-St-Zip: JACKSONVILLE, FL 32211

Title: SD () Delete
Name: THOMAS, RICKIE
Address: 3500 UNIVERSITY BLVD. N., #2201
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: ROBINSON, RHONDA H
Address: 1304 MAGNOLIA PLACE
City-St-Zip: JACKSONVILLE, FL 32211

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RHONDA H. ROBINSON

Electronic Signature of Signing Officer or Director

PTD

02/23/2005

Date