

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000574

FILED
Apr 14, 2009
Secretary of State

Entity Name: HIGHER HEIGHTS MINISTRIES, INC.

Current Principal Place of Business:

8291 DAMES POINT CROSSING BLVD.
SUITE # 3203
JACKSONVILLE, FL 32277

New Principal Place of Business:

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:

HIGHTOWER-ROBINSON, RHONDA
8291 DAMES POINT CROSSING BLVD.
SUITE 3203
JACKSONVILLE, FL 32277 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: PTD () Delete
Name: ROBINSON, RHONDA H
Address: 8291 DAMES POINT CROSSING BLVD.
City-St-Zip: JACKSONVILLE, FL 32277

Title: VD () Delete
Name: SUMLAR, LAMESHIA D
Address: 6103 WINDING BRIDGE
City-St-Zip: JACKSONVILLE, FL 32277

Title: SD () Delete
Name: THOMAS, RICKIE L
Address: 3500 UNIVERSITY BLVD. N. # 506
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: THOMAS, TODD T
Address: 3500 UNIVERSITY BLVD. N. # 904
City-St-Zip: JACKSONVILLE, FL 32277

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

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: HIGHTOWER-ROBINSON, RHONDA

PTD

04/14/2009

Electronic Signature of Signing Officer or Director

Date