

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006025

FILED
May 04, 2010
Secretary of State

Entity Name: HAND OF GOD MINISTRIES, INC.

Current Principal Place of Business:

14181 SW 275 ST
HOMESTEAD, FL 33032

New Principal Place of Business:

Current Mailing Address:

14181 SW 275 ST
HOMESTEAD, FL 33032

New Mailing Address:

FEI Number: 01-0590534 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MIGNON, CLAIRE-MARIE
14181 SW 275 ST
HOMESTEAD, FL 33032 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

OFFICERS AND DIRECTORS:

Title: PD
Name: MIGNON, CLAIRE-MARIE RPH
Address: 14181 SW 275 ST
City-St-Zip: HOMESTEAD, FL 33032

Title: VD
Name: BERNADEL, REGINE RPH
Address: 104 N BERGEN PL
City-St-Zip: FREEPORT, NY 11520

Title: SD
Name: GOUSSE, NADINE
Address: 13727 SW 152 ST #302
City-St-Zip: MIAMI, FL 33177

Title: TD
Name: LEGROS, EMMANUEL
Address: 14131 SW 275 ST
City-St-Zip: HOMESTEAD, FL 33032

Title: OD
Name: CADET, JOCELYNE
Address: 2100 B WHITE PINE CIRCLE
City-St-Zip: WEST PALM BCH, FL 33415

Title: OD
Name: JULIEANNE, PINDER BISHOP
Address: 730 N.E. 130 STREET
City-St-Zip: MIAMI, FL 3 3161

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: CLAIRE MARIE MIGNON

PD

05/04/2010

Electronic Signature of Signing Officer or Director

Date