

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006971

FILED  
Jan 17, 2008  
Secretary of State

**Entity Name:** HIDDEN SEED CHRISTIAN ASSEMBLY, INC.

**Current Principal Place of Business:**

1357 HART STREET  
JACKSONVILLE, FL 32209 US

**New Principal Place of Business:**

**Current Mailing Address:**

10453 GREENVILLE ROAD  
JACKSONVILLE, FL 32256 US

**New Mailing Address:**

**FEI Number:** 59-3676657

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOODMAN, ENOLA M  
10453 GREENVILLE ROAD  
JACKSONVILLE, FL 32256 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: PD ( ) Delete  
Name: GOODMAN, ENOLA M  
Address: 10441 GREENVILLE ROAD  
City-St-Zip: JACKSONVILLE, FL 32256

Title: ST ( ) Delete  
Name: MAINOR, ELECIA J  
Address: 4435 KENNDLE ROD  
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: TD ( ) Delete  
Name: SHULER, ERAKAL  
Address: 742 MACKENZIE CIRCLE  
City-St-Zip: ST. AUGUSTINE, FLORIDA, FL 32092 US

Title: VD ( ) Delete  
Name: JONES, JUNE  
Address: 1325 COUNTRYRIDGE PLACE  
City-St-Zip: ORLANDO, FL 32835

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: ERAKAL SHULER

TD

01/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date