

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006971

FILED
Mar 22, 2009
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:

10453 GREENVILLE ROAD
JACKSONVILLE, FL 32256 US

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

Title: ST (X) Change () Addition
Name: GOODMAN, ELECIA J
Address: 4435 KENNDLE ROAD
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: TD (X) Change () Addition
Name: SHULER, ERAKAL
Address: 12 PINTO LANE
City-St-Zip: PALM COAST, FL 32164 US

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

03/22/2009

Electronic Signature of Signing Officer or Director

Date