## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006143

FILED Apr 14, 2009 Secretary of State

Entity Name: HEAVEN'S KEY MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	HORES RD NVILLE, FL 322	07		
Current Mailing Address:		New Mailing Address:		
	HORES RD NVILLE, FL 322	07		
El Numbe	r: 59-3740584	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
1123 S. S	, DENISE HORES RD IVILLE, FL 322	07 US		
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
n the Stat	e of Florida. RE:	submits this statement for the place is signature of Registered Ag		ed office or registered agent, or both,  Date
n the Stat SIGNATU	e of Florida. RE:	ic Signature of Registered Ag	ent	
n the Stat  SIGNATU  DFFICER  Fitle: Name: Address:	e of Florida.  RE: Electron S AND DIREC	ic Signature of Registered Ag <b>FORS:</b> Delete  RA  LANE	ent	Date
n the Stat  BIGNATU  DFFICER  Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	e of Florida.  RE: Electron  S AND DIREC  DP () JAQUES, SAND 1100 DOODLE BRYCEVILLE, F	ic Signature of Registered Agr  FORS:  Delete RA  LANE FL 32009  Delete SE SS RD	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date GES TO OFFICERS AND DIRECTOR
n the Stat SIGNATU	E of Florida.  RE:  Electron  S AND DIREC  DP ()  JAQUES, SAND  1100 DOODLE  BRYCEVILLE, F  DVT ()  STRONG, DENI  1123 S. SHORE  JACKSONVILLE  S ()  LOWERY, JAIN	ic Signature of Registered Agrons:  Delete RA LANE EL 32009  Delete SE ES RD E, FL 32207  Delete IE DN EXPRESSWAY APT. #1004	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  BES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: DENISE STRONG VP 04/14/2009