

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000008

FILED
Feb 20, 2010
Secretary of State

Entity Name: IN HIS FULLNESS, INC.

Current Principal Place of Business:

1845 NW 42ND AVE.
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

1845 NW 42ND AVE.
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 02-0582665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERIA, JARED N
1845 NW 42ND AVE.
GAINESVILLE, FL 32605 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: CD
Name: HASTINGS, LANCE
Address: 4125 NW 18TH DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: SD
Name: HASTINGS, MARY ANN
Address: 4125 NW 18TH DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: P
Name: FERIA, JARED
Address: 1845 NW 42ND AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: TD
Name: VANDERVLUCHT, RALPH
Address: 839 MAPLE AVE
City-St-Zip: FINDLAY, OH 45840

Title: D
Name: MASSIAS, DAVID
Address: 9784 SW 52ND PLACE
City-St-Zip: GAINESVILLE, FL 32608

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: JARED FERIA

P

02/20/2010

Electronic Signature of Signing Officer or Director

Date