

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 02, 2012
Secretary of State

Entity Name: HIS BREATH MINISTRIES, INC.

Current Principal Place of Business:

19719 WYNDHAM LAKES DR.
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

19719 WYNDHAM LAKES DR.
ODESSA, FL 33556

New Mailing Address:

FEI Number: 22-3885628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROADARMEL, D. DOUGLAS
19719 WYNDHAM LAKES DR.
ODESSA, FL 33556 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: D
Name: ROADARMEL, D. DOUGLAS
Address: 19719 WYNDHAM LAKES DR.
City-St-Zip: ODESSA, FL 33556

Title: D
Name: ROADARMEL, ELIZABETH
Address: 19719 WYNDHAM LAKES DR.
City-St-Zip: ODESSA, FL 33556

Title: D
Name: HOWELL, ALAN
Address: 4998 HARBORWOODS DR.
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: BADENHORST, MARLO
Address: 203 SACRAMENTO ST.
City-St-Zip: VALRICO, FL 33594

Title: D
Name: DANIELS, GILBERT C
Address: 4132 BOYD LANE
City-St-Zip: PALM HARBOR, FL 34685

Title: D
Name: ROADARMEL, D. DOUGLAS
Address: 19719 WYNDHAM LAKES DRIVE
City-St-Zip: ODESSA, FL 33556

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: D.DOUGLAS ROADARMEL

D

03/02/2012

Electronic Signature of Signing Officer or Director

_____ Date