

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002113

FILED  
Jan 06, 2012  
Secretary of State

Entity Name: GATE OF HEAVEN, INC.

**Current Principal Place of Business:**

504 MISSION PARK LANE  
ST. AUGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

504 MISSION PARK LANE  
ST. AUGUSTINE, FL 32095

**New Mailing Address:**

FEI Number: 77-0593752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SELANDER, GUY T JR  
2716 VIA BAYA LANE  
JACKSONVILLE, FL 32223 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: BUSER, TOM  
Address: 5662 BAXTER LAKE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: D  
Name: ERICKSON, DICK  
Address: 2541 SPREADING OAKS LANE  
City-St-Zip: JACKSONVILLE, FL 32223

Title: D  
Name: BUTLER, RICHARD  
Address: 11885 OLDE OAKS CT. S.  
City-St-Zip: JACKSONVILLE, FL 32223

Title: D  
Name: MOUHALIS, LAURA  
Address: 504 MISSION PARK LANE  
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: D  
Name: SELANDER, GUY T JR.  
Address: 2716 VIA BAYA LANE  
City-St-Zip: JACKSONVILLE, FL 32223

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: GUY T. SELANDER, JR.

D

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date