

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003106

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** HEALING FROM THE INSIDE/OUT MINISTRIES, INC.

**Current Principal Place of Business:**

517 N.W. 98TH AVENUE  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 147  
FORT LAUDERDALE, FL 33302

**New Mailing Address:**

**FEI Number:** 41-2132762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STROUD, JEAN  
517 N.W. 98TH AVENUE  
PLANTATION, FL 33324 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:** ROBERTSON, SHANDRA  
**Address:** 5231 N.W. 12TH CT  
**City-St-Zip:** LAUDERHILL, FL 33313

**Title:** PD  
**Name:** GRESHAM, TRACY  
**Address:** P.O. BOX 190286  
**City-St-Zip:** FT. LAUDERDALE, FL 33319

**Title:** TD  
**Name:** STROUD, JEAN  
**Address:** 517 NW 98TH AVENUE  
**City-St-Zip:** PLANTATION, FL 33324

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:** TRACY GRESHAM

PD

05/01/2012

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

\_\_\_\_\_  
Date