

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012100

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** HEAVEN'S GARDEN MINISTRIES, INC.

**Current Principal Place of Business:**

2609 CORRAL DRIVE  
ALFORD, FL 32420

**New Principal Place of Business:**

**Current Mailing Address:**

2609 CORRAL DRIVE  
ALFORD, FL 32420

**New Mailing Address:**

**FEI Number:** 20-2025751

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPINA, AIDA  
2609 CORRAL DR.  
ALFORD, FL 32420 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: DP  
Name: SPINA, AIDA  
Address: 2609 CORRAL DRIVE  
City-St-Zip: ALFORD, FL 32420

Title: D  
Name: KING, DORIS  
Address: 11 RAINTREE CT.  
City-St-Zip: ORMOND BEACH, FL 32174

Title: D  
Name: NIEVES, JESSICA E  
Address: 350 ST. ANNS AVENUE APT. 2N  
City-St-Zip: BRONX, NY 10454

Title: D  
Name: BACON, MICHAEL  
Address: 3209 GRESHAM LAKE ROAD SUITE 121  
City-St-Zip: RALEIGH, NC 27614

Title: D  
Name: BLACKMON, WILLIE JR.  
Address: 455 WINGARD STREET  
City-St-Zip: CRESTVIEW, FL 32539

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: AIDA SPINA

PRES

01/09/2012

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

\_\_\_\_\_  
Date