

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000833

FILED
Mar 06, 2009
Secretary of State

Entity Name: HEART OF TITUS MINISTRIES, INC.

Current Principal Place of Business:

234 N WESTMONTE DR SUITE 3000
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

919 CREST COURT
APOPKA, FL 32712

Current Mailing Address:

234 N WESTMONTE DR SUITE 3000
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

919 CREST COURT
APOPKA, FL 32712

FEI Number: 20-2182011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARDELLA, ANTHONY M JR
234 N WESTMONTE DR SUITE 3000
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

NARDELLA, ANTHONY M JR
919 CREST COURT
APOPKA, FL 32712 US

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:

03/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NARDELLA, ANTHONY M JR
Address: 234 N WESTMONTE DR SUITE 3000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: MCGUFFIN, PAT
Address: 289 LAKE DOE BLVD
City-St-Zip: APOPKA, FL 32703

Title: D () Delete
Name: WATSON, TOMMY R
Address: 1966 CRANBERRY ISLES WAY
City-St-Zip: APOPKA, FL 32712

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: WARNER, LARRY J
Address: 874 HAVEN OAK COURT
City-St-Zip: APOPKA, FL 32703

Title: D () Change (X) Addition
Name: LEE, TROY S
Address: 1416 PAULA DRIVE
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANTHONY M. NARDELLA, JR.

PRES

03/06/2009

Electronic Signature of Signing Officer or Director

Date