## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000012197

FILED Mar 21, 2009 Secretary of State

Entity Name: HIS PLACE MINISTRIES EAST COAST, INC. **Current Principal Place of Business: New Principal Place of Business:** 1824 SOUTH HARBOR CITY BLVD. MELBOURNE, FL 32901 **Current Mailing Address: New Mailing Address:** P.O. BOX 034068 INDIALANTIC, FL 32903 FEI Number: 26-0130464 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORRIS, TERRY 330 WATSON DRIVE INDIALANTIC, FL 32903 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MORRIS, TERRY Name: Name: Address: 330 WATSON DRIVE Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: Title: () Delete Title: () Change () Addition MOUNTAIN, NOEL Name: Name: Address: 701 SOUTH PALM AVENUE Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: Title: () Delete Title: () Change () Addition MORRIS, BETTY Name: Name: 330 WATSON DRIVE Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip:

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: TERRY MORRIS PRES 03/21/2009