

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 13, 2009  
Secretary of State**

DOCUMENT# N06000000065

Entity Name: THE CHURCH OF THE HEALING SPIRIT, INC.

**Current Principal Place of Business:**

3244 SUNDANCE CIR.  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

3244 SUNDANCE CIR.  
NAPLES, FL 34109

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

COSTELLO, MARY ANN  
3244 SUNDANCE CIR.  
NAPLES, FL 34109 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 ( ) Delete  
Name: COSTELLO, E. THOMAS  
Address: 3244 SUNDANCE CIR.  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: COSTELLO, MARY ANN  
Address: 3244 SUNDANCE CIR.  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: WOFFINDEN, LISA M.  
Address: 1507 BRONCO DR.  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: WOFFINDEN, LISA M.  
Address: 228 WILLOW BLUFF  
City-St-Zip: CIBOLO, TX 78108

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: MARY ANN COSTELLO

D

01/13/2009

Electronic Signature of Signing Officer or Director

Date