

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005774

FILED
Jul 16, 2007
Secretary of State

Entity Name: HEART TO HEART CARIBBEAN MINISTRY.INC

Current Principal Place of Business:

1014 E YUKON STREET
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

2503 ORANGE TREES LOOP
202
TAMPA, FL 33618

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

THELUSMAR, CHELETTE G
2503 ORANGE TREES LOOP
202
TAMPA, FL 33618 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:

Title: D () Delete
Name: WNEK, MICHAEL C
Address: 316 ARIANA BLVD
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: BRIGGS, RAYMOND C
Address: 13285 EASTERN AVENUE
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: REVELL, DAVID M
Address: FIRST & SHEPARD AVENUE
City-St-Zip: DUNDEE, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DANIEL, THELUSMAR
Address: 2503 ORANGE TREE LOOP APT 202
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change () Addition
Name: MOISE, GARCON
Address: 309 DILLONG STREET
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Change () Addition
Name:
Address:
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: DANIEL THELUSMAR

D

07/16/2007

Electronic Signature of Signing Officer or Director

Date