

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007859

FILED  
Jan 06, 2007  
Secretary of State

**Entity Name:** HOLY REFUGE EVANGELISTRIC MISSION INC.

**Current Principal Place of Business:**

1005 PURYEAR STREET  
ST AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

1005 PURYEAR STREET  
ST AUGUSTINE, FL 32084

**New Mailing Address:**

**FEI Number:** 16-1767749

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REESE, JOYCE  
1005 PURYEAR STREET  
ST AUGUSTINE, FL 32084 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:** REESE, JOYCE  
**Address:** 1005 PURYEAR STREET  
**City-St-Zip:** ST AUGUSTINE, FL 32084

**Title:** DT ( ) Delete  
**Name:** REESE, HENRY  
**Address:** 1005 PURYEAR STREET  
**City-St-Zip:** ST AUGUSTINE, FL 32084

**Title:** DS ( ) Delete  
**Name:** WILSON, TINASHA  
**Address:** 1005 PURYEAR STREET  
**City-St-Zip:** ST AUGUSTINE, FL 32084

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

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

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

**Title:** DS (X) Change ( ) Addition  
**Name:** WILLIAMS, GLORIA  
**Address:** 141 SOUTH NASSAU STREET  
**City-St-Zip:** ST AUGUSTINE, FL 32084

I hereby certify that the information supplied with this filing does not qualify for the 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:** JOYCE S. REESE

D

01/06/2007

Electronic Signature of Signing Officer or Director

Date