

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008191

FILED  
Feb 05, 2010  
Secretary of State

**Entity Name:** HEART OF MERCY MINISTRIES, INC.

**Current Principal Place of Business:**

4832 ABADAN  
NORTH PORT, FL 34287

**New Principal Place of Business:**

**Current Mailing Address:**

4832 ABADAN  
NORTH PORT, FL 34287

**New Mailing Address:**

**FEI Number:** 20-5592641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEE, RICHARD V  
305 CHAUNCEY AVE EAST  
BRADENTON, FL 34208 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:** DP  
**Name:** JANSSEN, CHRIS  
**Address:** 4832 ABADAN ST  
**City-St-Zip:** NORTH PORT, FL 34287

**Title:** DVT  
**Name:** CAIMI, DANIEL  
**Address:** 4832 ABADAN ST  
**City-St-Zip:** NORTH PORT, FL 34287

**Title:** D  
**Name:** THOMAS, JULIE  
**Address:** 1070 PRESQUE ISLE DR  
**City-St-Zip:** PORT CHARLOTTE, FL 33952

**Title:** D  
**Name:** LEE, RICHARD  
**Address:** 305 CHAUNCEY AVE EAST  
**City-St-Zip:** BRADENTON, FL 34028

**Title:** D  
**Name:** LEE, CHRISTINA  
**Address:** 305 CHAUNCEY AVE EAST  
**City-St-Zip:** BRADENTON, FL 34028

**Title:** DVS  
**Name:** JANSSEN, SARAH  
**Address:** 4832 ABADAN ST.  
**City-St-Zip:** NORTH PORT, FL 34287

I hereby 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 all other like empowered.

**SIGNATURE:** DANIEL CAIMI

DVT

02/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date