2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# N07000004753

Entity Name: HIGHER DIMENSIONS SUPPORT SERVICES, INC.

Current Principal Place of Business:

1509 SOUTH WICKHAM ROAD
WEST MELBOURNE, FL 32904

New Principal Place of Business:

927 OSPREY DRIVE
MELBOURNE, FL 32940

Current Mailing Address:

1509 SOUTH WICKHAM ROAD
WEST MELBOURNE, FL 32904

New Mailing Address:

927 OSPREY DRIVE
MELBOURNE, FL 32940

FEI Number: 37-1670261 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SOLOLA, MARYAM M
927 OSPREY DRIVE
MELBOURNE, FL 32940 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: VP ( ) Delete
Name: MURBE, MURBE A
Address: 4870 SOUTH SEMORAN BLVD.
City-St-Zip: ORLANDO, FL 32822

Title: D ( ) Delete
Name: AL-SHIKELY, ALI A
Address: 11918 ALAFAYA WOODS CT
City-St-Zip: ORLANDO, FL 32826

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HUSSEIN, RATIB A
Address: 10143 RIDGEBLOOM AVE
City-St-Zip: ORLANDO, FL 32829

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

Title: D ( ) Change (X) Addition
Name: LYNCH, BINTA S
Address: 998 PYRACANTHA STREET
City-St-Zip: PALM BAY, FL 32907

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: ALI A. AL-SHIKELY D 03/16/2009

Electronic Signature of Signing Officer or Director — Date