

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009119

FILED
Jan 16, 2009
Secretary of State

Entity Name: HUNGER FREE MISSION FOR CHRIST, INC.

Current Principal Place of Business:

2012 HEMLOCK ST.
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

2012 HEMLOCK ST.
TAMPA, FL 33619

New Mailing Address:

FEI Number: 87-0807700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUBERT, GREGORY J.
2012 HEMLOCK ST.
TAMPA, FL 33605 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: JUBERT, GREGORY J.
Address: 2012 HEMLOCK ST.
City-St-Zip: TAMPA, FL 33605

Title: D () Delete
Name: SWINDLE, PATRICIA
Address: 3420 S. 70 ST.
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: SANDERS, KIMBERLY A.
Address: 6207 WATERMARK DR., APT. 105
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GREGORY J JUBERT

D

01/16/2009

Electronic Signature of Signing Officer or Director

Date