

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 8:00 am
Secretary of State

04-16-2008 90028 009 ****61.25

DOCUMENT # N07000009403

1. Entity Name
H.U.G.G. MINISTRIES INC



Principal Place of Business
 1300 LAUREL DR
 1300
 DAYTONA BCH, FL 32117

Mailing Address
 1300 LAUREL DR
 1300
 DAYTONA BCH, FL 32117

60024468



2. Principal Place of Business - No P.O. Box #
1300 LAUREL DR

3. Mailing Address
1300 LAUREL DR

Suite, Apt. #, etc.

04022008 Chg-NP CR2E037 (12/06)

City & State
DAYTONA BEACH, FL.

City & State
DAYTONA BEACH, FL.

Zip
32117

Country
USA

4. FEI Number
26-0606815

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

LINTON, A RENAYE
807 ST JOHNS AVE
PALATKA, FL 32177

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

| | | |
|--|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P BROWN, GENE 1300 LAUREL DR DAYTONA BCH, FL 32117 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP BROWN, VELMA 1300 LAUREL DR DAYTONA BCH, FL 32117 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SEC BROWN, JAMECA 1300 LAUREL DR PALATKA, FL 32117 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SEC BROWN, JAMECA 1300 LAUREL DRIVE DAYTONA BEACH, FL 32117 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gene A. Brown*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/08 (386)679-5880
 Date Daytime Phone #