

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002187

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: HICKMON MINISTRIES INC.

## Current Principal Place of Business:

9526-B2 ARGYLE FOREST BLVD., PMB 311  
JACKSONVILLE, FL 32222

## New Principal Place of Business:

## Current Mailing Address:

9526-B2 ARGYLE FOREST BLVD., PMB 311  
JACKSONVILLE, FL 32222

## New Mailing Address:

FEI Number: 26-2024489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HICKMON, WILLIAM D  
684 SOUTHLAND LANE  
ORANGE PARK, FL 32065 US

## Name and Address of New Registered Agent:

HICKMON, WILLIAM D  
785 OAKLEAF PLANTATION PARKWAY  
321  
ORANGE PARK, FL 32065 US

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:

04/03/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HICKMON, WILLIAM D  
Address: 684 SOUTHLAND LANE  
City-St-Zip: ORANGE PARK, FL 32065

Title: D ( ) Delete  
Name: HICKMON, LA SHAY S  
Address: 684 SOUTHLAND LANE  
City-St-Zip: ORANGE PARK, FL 32065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HICKMON, WILLIAM D  
Address: 785 OAKLEAF PLANTATION PARKWAY #321  
City-St-Zip: ORANGE PARK, FL 32065

Title: D (X) Change ( ) Addition  
Name: HICKMON, LA SHAY S  
Address: 785 OAKLEAF PLANTATION PARKWAY #321  
City-St-Zip: ORANGE PARK, FL 32065

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: WILLIAM D. HICKMON

MR.

04/03/2009

Electronic Signature of Signing Officer or Director

Date