

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006118

FILED
Apr 30, 2009
Secretary of State

Entity Name: HIS CALL TO SERVE, INC.

Current Principal Place of Business:

2943 SPRING PARK RD.
502
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX, 57931
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 83-0513491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCIS, DORIS S
2943 SPRING PARK RD.
502
JACKSONVILLE, FL 32207 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: PD () Delete
Name: FRANCIS, DORIS S
Address: 2943 SPRING PARK RD.
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D () Delete
Name: TAYLOR, MARIAN
Address: 9767 HIGHWAY 149
City-St-Zip: MONTGOMERY, TX 77316 US

Title: DTS () Delete
Name: KANNEH, NANU D
Address: 2943 SPRING PARK RD.
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D () Delete
Name: WATTS, MEDRA
Address: 3074 BENT BOW LANE
City-St-Zip: MIDDLEBURG, FL 32065 US

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:

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: DORIS FRANCIS

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date