

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007274

FILED
May 05, 2009
Secretary of State

Entity Name: HORN OF SALVATION MINISTRIES INC.

Current Principal Place of Business:

104 KING STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

2946 CAPPER ROAD
JACKSONVILLE, 32218

New Mailing Address:

2946 CAPPER ROAD
JACKSONVILLE, FL 32218

FEI Number: 26-3097812 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BURGIN, AARON
2946 CAPPER ROAD
JACKSONVILLE, FL 32218 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: PRES () Delete
Name: BURGIN, AARON
Address: 2946 CAPPER ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP () Delete
Name: BURGIN, KIMBERLY
Address: 2946 CAPPER ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: TRES () Delete
Name: SCOTT, THOMASINA
Address: 6610 RIPPLING WAVE COURT
City-St-Zip: JACKSONVILLE, FL 32244

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: MEM (X) Change () Addition
Name: SCOTT, THOMASINA
Address: 6610 RIPPLING WAVE COURT
City-St-Zip: JACKSONVILLE, FL 32244

Title: TRES () Change (X) Addition
Name: HAYWOOD, TAMARA NICOLE
Address: 1732 WEST 44 STREET
City-St-Zip: JACKSONVILLE, FL 32209

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: AARON D BURGIN

PRES

05/05/2009

Electronic Signature of Signing Officer or Director

Date