2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N08000009054

Entity Name: HIGHER CALL MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

3175 HOLIDAY SPRINGS BLVD #33
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

PO BOX 771325
CORAL SPRINGS, FL 33077

New Mailing Address:

P.O. BOX 771325
CORAL SPRINGS, FL 33077

FEI Number: 26-4752865 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VALMYR, WILLIAM
3175 HOLIDAY SPRINGS BLVD #33
MARGATE, FL 33063 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: P ( ) Delete
Name: VALMYR, WILLIAM
Address: 3175 HOLIDAY SPRINGS BLVD #33
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete
Name: VALMYR, MARSHA
Address: 3175 HOLIDAY SPRINGS BLVD #33
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete
Name: DULIS, JERSON
Address: 8404 W SAMPLE RD #237
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D ( ) Delete
Name: DULIS, YVELINE G
Address: 8404 W SAMPLE RD #237
City-St-Zip: CORAL SPRINGS, FL 33065

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: WILLIAM VALMYR P 04/28/2009

Electronic Signature of Signing Officer or Director — Date