2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011149

Apr 04, 2012 Secretary of State

Entity Name: EILEEN HUBERS MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

226 SOUTH SEACREST CIRCLE DELRAY BEACH, FL 33444

Current Mailing Address: New Mailing Address:

226 SOUTH SEACREST CIRCLE DELRAY BEACH, FL 33444

FEI Number: 94-3458847 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUBERS, EILEEN REV. 226 SOUTH SEACREST CIRCLE DELRAY BEACH, FL 33444 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: HUBERS, EILEEN REV
Address: 226 SOUTH SEACREST CIRCLE
City-St-Zip: DELRAY BEACH, FL 33444

Title: ST

Name: HUBERS, PAUL

Address: 226 SOUTH SEACREST CIRCLE City-St-Zip: DELRAY BEACH, FL 33444

Title: VF

Name: OCCHIPINTI, FRED REV.

Address: 1310 NORTH

City-St-Zip: LAKE WORTH, FL 33460

Title:

Name: FERDINAND, GRELL DOCTOR

Address: 2829 NW 87 AVENUE City-St-Zip: SUNRISE, FL 33322

Title:

 Name:
 GRADY, KAREN C

 Address:
 1725 SECOND STREET

 City-St-Zip:
 NEW ORLEANS, LA 70113

Title:

Name: WARNER, PENELOPE A
Address: 7208-A EAST OAKRIDGE CIRCLE

City-St-Zip: LANTANA, FL 33462

I hereby 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 all other like empowered.

SIGNATURE: REV. EILEEN J. HUBERS P 04/04/2012