2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001342

Entity Name: HIGHER POWER INFLUENCE, INC

FILED Apr 14, 2011 Secretary of State

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

3095 NORTHRIDE LANE 1514 GRANADA AVENUE BONIFAY, FL 32425 1514 GRANADA AVENUE HOLLY HILL, FL 32117

Current Mailing Address: New Mailing Address:

3095 NORTHRIDE LANE
BONIFAY, FL 32425
1514 GRANADA AVENUE
HOLLY HILL, FL 32117

FEI Number: 26-4168866 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:

MACMASTER, SALLY BETH
3095 NORTHRIDE LANE
BONIFAY, FL 32425 US

MACMASTER, SALLY BETH
1514 GRANADA AVENUE
HOLLY HILL, FL 32117 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: MRS. SALLY BETH MACMASTER 04/14/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: I

Name: MACMASTER, SALLY BETH Address: 1514 GRANADA AVENUE City-St-Zip: HOLLY HILL, FL 32117

Title: VP

Name: STUFF, DAVID C III
Address: 1344 CEDAR BLUFF
City-St-Zip: HOLLY HILL, FL 32117

Title: VP

Name: BOBLETZ, LAURIE S Address: 223 S GLENWOOD AV City-St-Zip: ORLANDO, FL 32803

Title: VF

Name: WREN, PATRICK E Address: 463 N YONGE ST

City-St-Zip: ORMOND BEACH, FL 32174

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: SALLY BETH MACMASTER MRS. 04/14/2011