

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001779

FILED  
Jun 15, 2011  
Secretary of State

**Entity Name:** HE REIGN EDUCATIONAL CENTER INC.

**Current Principal Place of Business:**

10401 NW 17 AVE #103  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

10401 NW 17 AVE #103  
MIAMI, FL 33147

**New Mailing Address:**

**FEI Number:** 27-2165876

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRIMMINGS, MARK  
10401 NW 17 AVE #103  
MIAMI, FL 33147 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  
Name: TRIMMINGS, MARK  
Address: 10401 NW 17 AVE #103  
City-St-Zip: MIAMI, FL 33147

Title: V  
Name: TRIMMINGS, GAIL  
Address: 10401 NW 17 AVE #103  
City-St-Zip: MIAMI, FL 33147

Title: T  
Name: FULLER, MILTON  
Address: 9801 BOSQUE LANE  
City-St-Zip: MIRAMAR, FL 33025

Title: S  
Name: MCCOY, ETHEL  
Address: 509 NW 10 ST  
City-St-Zip: MIAMI, FL 33136

Title: D  
Name: GRACE, ROSELLA  
Address: 10710 SW 150 TERR  
City-St-Zip: MIAMI, FL 33157

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: MARK R. TRIMMINGS,PASTOR/ DIRECTOR

PRES

06/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date