

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007532

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** HAPPY HILL MINISTRIES, INC.

**Current Principal Place of Business:**

2900 WINIFRED AVENUE  
ZELLWOOD, FL 32798 US

**New Principal Place of Business:**

2900 WINFRED AVENUE  
ZELLWOOD, FL 32798 US

**Current Mailing Address:**

2900 WINIFRED AVENUE  
ZELLWOOD, FL 32798 US

**New Mailing Address:**

**FEI Number:** 59-2769693      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

REID, DARRELL D  
2900 WINIFRED AVENUE  
ZELLWOOD, FL 32798 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  
**Name:** DR. DARRELL REID, FOUNDER/PRES.  
**Address:** 2900 WINIFRED AVENUE  
**City-St-Zip:** ZELLWOOD, FL 32798 US

**Title:** VP  
**Name:** REV. KATIE REID, FOUNDER/TREASURER/VP  
**Address:** 2900 WINIFRED AVENUE  
**City-St-Zip:** ZELLWOOD, FL 32798 US

**Title:** SEC  
**Name:** GEORGE MERTENS, JR. DEACON/SECRETARY  
**Address:** 3134 PLYMOUTH SORRENTO ROAD  
**City-St-Zip:** APOKA, FL 32712 US

**Title:** TRUS  
**Name:** ALTA LEWIS, PASTOR, THE PEOPLES CHURCH  
**Address:** 13246 FLORIDA AVENUE  
**City-St-Zip:** ASTATULA, FL 34705 US

**Title:** TRUS  
**Name:** JAMES FERGUSON, SR. DEACON  
**Address:** 2900 WINIFRED AVENUE  
**City-St-Zip:** ZELLWOOD, FL 32798 US

**Title:** TRUS  
**Name:** FOREST DOBBS, JR. DEACON/TRUSTEE  
**Address:** 2900 WINIFRED AVENUE  
**City-St-Zip:** ZELLWOOD, FL 32798 US

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: D. REID

PRES

02/16/2011

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

\_\_\_\_\_  
Date