

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011253

FILED
Apr 22, 2011
Secretary of State

Entity Name: HEALING WIND MINISTRIES, INC.

Current Principal Place of Business:

201 PENSACOLA BEACH RD D-8
GULF BREEZE, FL 32561

New Principal Place of Business:

1327 STERLING POINT DR
GULF BREEZE, FL 32563

Current Mailing Address:

201 PENSACOLA BEACH RD D-8
GULF BREEZE, FL 32561

New Mailing Address:

1327 STERLING POINT DR
GULF BREEZE, FL 32563

FEI Number: 27-4205582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEACE, JEANNIE M
201 PENSACOLA BEACH RD D-8
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

PEACE, JEANNIE M
1327 STERLING POINT DR
GULF BREEZE, FL 32563 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:

04/22/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: POHLE, JAMES H
Address: 1327 STERLING POINT DR
City-St-Zip: GULF BREEZE, FL 32563

Title: D
Name: LOWE, MARCIA
Address: 4342 CROSSWINDS DR
City-St-Zip: MILTON, FL

Title: ST
Name: PEACE, JEANNIE
Address: 1327 STERLING POINT DR
City-St-Zip: GULF BREEZE, FL 32563

Title: D
Name: ALLEN, RENE
Address: 3409 W. LLOYD ST
City-St-Zip: PENSACOLA, FL 32504

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: JAMES H POHLE

PRES

04/22/2011

Electronic Signature of Signing Officer or Director

Date