

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000002848

**FILED**  
**Apr 08, 2012**  
**Secretary of State**

**Entity Name:** NEHEMIAH'S VILLAGE, INC.

**Current Principal Place of Business:**

5107 29TH AVENUE SOUTH  
GULFPORT, FL 33707

**New Principal Place of Business:**

**Current Mailing Address:**

5107 29TH AVENUE SOUTH  
GULFPORT, FL 33707

**New Mailing Address:**

**FEI Number:** 45-1562463

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FAEHNER, MICHAEL J ESQ  
2380 DREW ST, SUITE 4  
CLEARWATER, FL 33765 US

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

FAEHNER, MICHAEL J ESQ  
600 BYPASS DRIVE  
SUITE 208  
CLEARWATER, FL 33764 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: MICHAEL J. FAEHNER

04/08/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ST JEAN, KAREN  
Address: 5107 29TH AVENUE SOUTH  
City-St-Zip: GULFPORT, FL 33707

Title: VPD  
Name: SERRANO, GEORGENE  
Address: 2811 EAGLES NEST DR  
City-St-Zip: PALM HARBOR, FL 34683

Title: SD  
Name: LABRECQUE, LORI  
Address: 524 DR ML KING STREET SOUTH, APT #5  
City-St-Zip: ST PETERSBURG, FL 33701

Title: TD  
Name: ROTH, JANICE  
Address: P O BOX 46405  
City-St-Zip: ST PETE BEACH, FL 33741

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: KAREN ST. JEAN

PRES

04/08/2012

Electronic Signature of Signing Officer or Director

Date