

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25379

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** HOUSE OF MINISTRIES, INC.

**Current Principal Place of Business:**

9646 HIGHLAND AVE  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

9648 WOODLAND AVE  
JACKSONVILLE, FL 32208

**New Mailing Address:**

**FEI Number:** 59-2883616

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILLIAMS, MARY ELLEN  
9648 WOODLAND AVE.  
JACKSONVILLE, FL 32208 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:** PD  
**Name:** WILLIAMS, ARLO V.  
**Address:** 9648 WOODLAND AVE.  
**City-St-Zip:** JACKSONVILLE, FL 32208

**Title:** VD  
**Name:** TONYA W. TORRES  
**Address:** 9080 BERENS ST.  
**City-St-Zip:** JACKSONVILLE, FL 32210

**Title:** SD  
**Name:** STEPHEN TORRES  
**Address:** 9080 BERENS ST.  
**City-St-Zip:** JACKSONVILLE, FL 32210

**Title:** TD  
**Name:** WILLIAMS, MARY  
**Address:** 9648 WOODLAND AVE.  
**City-St-Zip:** JACKSONVILLE, FL 32208

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:** MARY ELLEN WILLIAMS

TD

04/27/2010

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

\_\_\_\_\_  
Date