2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2009
Secretary of State

DOCUMENT# N94000000525

Entity Name: HEALING FOR THE NATIONS CHURCH AND BIBLE TRAINING CENTER, INCORPORATED

Current Principal Place of Business:

3205 S SEACREST BLVD
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

1250 S.W. 26TH AVENUE
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 65-0472811 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CERICOLA, ALEXANDER P
1250 S.W. 26TH AVENUE
BOYNTON BEACH, FL 33426 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 ( ) Delete
Name: CERICOLA, ALEXANDER P
Address: 1250 S.W. 26TH AVE.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: ST ( ) Delete
Name: CERICOLA, ANTOINETTE R
Address: 1250 S.W. 26TH AVE.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: V ( ) Delete
Name: BADY, MICHAEL
Address: 4700 N. W. 26TH AVENUE
City-St-Zip: BOCA RATON, FL 33434

Title: D ( ) Delete
Name: TALONE, SANTO T
Address: 5184 EAST MAIN STREET ROAD
City-St-Zip: BATAVIA, NY 14020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALEXANDER P. CERICOLA PRES 02/10/2009

Electronic Signature of Signing Officer or Director — Date