

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005302

FILED  
Apr 18, 2006  
Secretary of State

**Entity Name:** THE HEALING LOVE OF JESUS MINISTRY, INC.

**Current Principal Place of Business:**

1532 61ST STREET SOUTH  
GULFPORT, FL 33707

**New Principal Place of Business:**

1532 61ST STREET SOUTH  
GULFPORT, FL 33707 US

**Current Mailing Address:**

P.O. BOX 7196  
ST. PETERSBURG, FL 33734

**New Mailing Address:**

P.O. BOX 7196  
ST. PETERSBURG, FL 33734 US

**FEI Number:** 59-3533478

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUNNE, JOHN P  
10833 70TH AVE. N.  
SEMINOLE, FL 33712 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: PCD ( ) Delete  
Name: KRESGE, JOSEPH W  
Address: 1532 61ST STREET S.  
City-St-Zip: GULFPORT, FL 33707 US

Title: D ( ) Delete  
Name: WEBSTER, ELLE S  
Address: 5101 41ST. ST. SO.  
City-St-Zip: ST. PETERSBURG, FL 33711 US

Title: STD ( ) Delete  
Name: CHAMBERS, FRANCES A  
Address: 1335 22ND AVE. N  
City-St-Zip: ST. PETERSBURG, FL 33704 US

Title: D ( ) Delete  
Name: SMYZER, ROGER  
Address: 250 SIESTA LANE  
City-St-Zip: LARGO, FL 33770 US

Title: VD ( ) Delete  
Name: SCIANDRA, JOHN  
Address: 6233 27TH. AVE. NO.  
City-St-Zip: ST. PETERSBURG, FL 33710 US

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANCES A. CHAMBERS

SECR

04/18/2006

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

\_\_\_\_\_  
Date