

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001613

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** HEAVENLY HOST MINISTRIES INC.

**Current Principal Place of Business:**

2431 ALOMA AVE.  
140  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2601  
ORLANDO, FL 32802

**New Mailing Address:**

**FEI Number:** 59-3569850      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

LOVE, BRETT  
3015 WHISPER LAKE LANE STE. A  
WINTER PARK, FL 32792 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: MILLER, SHIRLEY  
Address: 2431 ALOMA STE 140  
City-St-Zip: WINTER PARK, FL

Title: MCSD ( ) Delete  
Name: LOVE, BRETT  
Address: 3015 WHISPERLAKE LN. STE A  
City-St-Zip: WINTER PARK, FL 32792

Title: VCSD ( ) Delete  
Name: HOUSTON, LOUISE  
Address: 5809 MAPLEWOOD  
City-St-Zip: CHICAGO, IL 60629

Title: D ( ) Delete  
Name: MARTINO, CHERRY  
Address: 701 RIVER RD APT 9  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: KIMBER, JACQUELYN  
Address: 7662 TOWHEE TRAIL  
City-St-Zip: ORLANDO, FL 32810

**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 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: SHIRLEY MILLER

DIRE

05/01/2009

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

\_\_\_\_\_  
Date