## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000002225

FILED Mar 03, 2007 Secretary of State

Entity Name: CIRCUMCISION OF THE HEART MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 14087 GOLDEN EAGLE DR JACKSONVILLE, FL 32218 **Current Mailing Address: New Mailing Address:** 14087 GOLDEN EAGLE DR 14087 GOLDEN EAGLE DR JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32226 FEI Number: 59-3628952 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: FERRELL, TYRONE L FERRELL, TYRONE L 14087 GOLDEN EAGLE DR 14087 GOLDEN EAGLE DR US JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32226 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: TYRONE FERRELL 03/03/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition HALL, JOSEPH N JR. Name: Name: P.O. BOX 1032 Address: Address: City-St-Zip: COELMAN, FL 335211032 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: FERRELL, TYRONE Name: FERRELL, TYRONE Address: 14087 GOLDEN EAGLE DR Address: 14087 GOLDEN EAGLE DR City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32226 Title: () Delete Title: () Change () Addition HALL, DAVID L Name: Name: Address: P.O. BOX 1032 Address: City-St-Zip: COLEMAN, FL 335211032 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FERRELL, OLIVIA A Name: Address: 14087 GOLDEN EAGLE DR Address: City-St-Zip: JACKSONVILLE, FL 32218 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: TYRONE FERRELL Ρ 03/03/2007