

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000049763

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** HIGHER PLACE CHRISTIAN UNIVERSITY, INC.

**Current Principal Place of Business:**

3539 APALACHEE PKWY  
77  
TALLAHASSEE, FL 32311

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 162766  
ATLANTA, GA 30321 US

**New Mailing Address:**

**FEI Number:** 27-2784835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ABRAHAM, FAITH CHISARA  
3539 APALACHEE PKWY  
77  
TALLAHASSEE, FL 32311 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  
Name: ABRAHAM, UYI  
Address: 5337 CREEKVIEW WAY  
City-St-Zip: MORROW, GA 30260 US

Title: VP  
Name: ABRAHAM, FAITH  
Address: P. O. BOX 162766  
City-St-Zip: ATLANTA, GA 30260 US

Title: SEC  
Name: UGBALA, IFY  
Address: 6776 SOUTHWEST FWY  
City-St-Zip: HOUSTON, TX 77074 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: UYI ABRAHAM

PRES

03/28/2012

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

\_\_\_\_\_  
Date