3000 HARTLEY SUITE 3 JACKSONVILL	-			
Current Mai	ling Address:			
	CIRCLE SOUTH ILLE, FL 32217			
FEI Number	: 47-3202276		Certificate of Status Des	sired: No
Name and A	ddress of Current Registered Agen	t:		
QUINLAN, BRU 2360 JOSE CIR JACKSONVILL				
The above name	d entity submits this statement for the purpose of char	ging its registered office or regis	tered agent, or both, in the State of F	lorida.
SIGNATURE: BRUCE QUINLAN				06/29/2018
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PC	Title	VPD	
Name	QUINLAN, BRUCE	Name	QUINLAN, PATRICIA	
Address	2360 JOSE CIRCLE SOUTH	Address	2360 JOSE CIRCLE SOUTH	
City-State-Zip:	JACKSONVILLE FL 32217	City-State-Zip:	JACKSONVILLE FL 32217	
T :0.	25			

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: HEALING COUNSELING AND HEALING PRAYER SERVICES

Title	SD
Name	WALSH, JOAN
Address	2360 JOSE CIRCLE SOUTH
City-State-Zip:	JACKSONVILLE FL 32217

DOCUMENT# N1500003162

Current Principal Place of Business:

CORP.

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

SIGNATURE: BRUCE QUINLAN

Electronic Signature of Signing Officer/Director Detail

PC PRESIDENT

06/29/2018

FILED Jun 29, 2018 Secretary of State CC7635860062

Date