## **2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000092025

Entity Name: MOVING ONTO HIGHER GROUND, INC.

**Current Principal Place of Business:** 

1831 CYPRESS PRESERVE DR.

UNIT # 1-105 LUTZ, FL 33549

**Current Mailing Address:** 

P.O. BOX 222365

WEST PALM BEACH, FL 33422 US

FEI Number: 37-1512707 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BOWEN, ANDREA 2411 WHISPERING WOODS BLVD. UNIT # 1 JACKSONVILLE, FL 32246 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:

Officer/Director Detail:

Title D Title PCOT

Electronic Signature of Registered Agent

NameBOWEN, ANDREANameBOWEN, ANDREAAddressP.O. BOX 222365AddressP.O. BOX 222365

City-State-Zip: WEST PALM BEACH FL 33422 City-State-Zip: WEST PALM BEACH FL 33422

Title EVP Title S

Name YATES, ANNETTE Name BINES, PRISCILLA

Address 2673 COBBLESTONE FOREST DR. Address 3801 CROWN POINT ROAD # 3105

City-State-Zip: JACKSONVILLE FL 32225 City-State-Zip: JACKSONVILLE FL 32257

Title H Title C

Name JACKSON, ANGELA Name BOWEN, DOROTHY

Address 11932 HUGE EVERGREEN CT. Address 2411-1 WHISPERING WOODS BLVD.

City-State-Zip: JACKSONVILLE FL 32223 City-State-Zip: JACKSONVILLE FL 32246

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: ANDREA BOWEN

FOUNDER, PRESIDENT & 0
DIRECTOR

04/23/2015

Date

FILED Apr 23, 2015

**Secretary of State** 

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