

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002929

FILED  
May 10, 2011  
Secretary of State

**Entity Name:** AWAKENING TRUE VINE INTERNATIONAL OUTREACH MINISTRIE INC.

**Current Principal Place of Business:**

600 MARSH ISLE CIRCLE  
#102  
PORT SAINT LUCIE, FL 34952

**New Principal Place of Business:**

600 MARSH ISLE CIRCLE  
#102  
PORT SAINT LUCIE, FL 34952 US

**Current Mailing Address:**

600 MARSH ISLE CIRCLE  
#102  
PORT SAINT LUCIE, FL 34952 US

**New Mailing Address:**

FEI Number: 65-1093392      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PARCHMENT, LOIS J APOSTLE  
600 MARSH ISLE CIRCLE  
#102  
PORT SAINT LUCIE, FL 34952 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: PD  
Name: PARCHMENT, LOIS J APOSTLE  
Address: 600 MARSH ISLE CIRCLE #102  
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

Title: T  
Name: JOHNSON, BETSEY  
Address: 600 MARSH ISLE CIR #102  
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

Title: AST  
Name: TINA, CASH ADMIN  
Address: 665 NW 195TH TERR.  
City-St-Zip: MIAMI, FL 33169 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: APOSTLE LOIS J. PARCHMENT

PD

05/10/2011

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

\_\_\_\_\_  
Date