

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003343

FILED
May 01, 2008
Secretary of State

Entity Name: REFUGE HOUSE MINISTRIES, INC.

Current Principal Place of Business:

2330 AURORA RD.
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

2330 AURORA RD.
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-3720264 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRAHM, RICHARD H
2330 AURORA RD
MELBOURNE, FL 32935 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 () Delete
Name: FRAHM, RICHARD H
Address: 2330 AURORA RD
City-St-Zip: MELBOURNE, FL 32935

Title: TD () Delete
Name: FRAHM, CAROLINE O
Address: 2330 AURORA RD
City-St-Zip: MELBOURNE, FL 32935

Title: VD () Delete
Name: SAUER, LESTER
Address: PO BOX 362342
City-St-Zip: MELBOURNE, FL 329363243

Title: D (X) Delete
Name: FRODGE, KIM
Address: PO BOX 362342
City-St-Zip: MELBOURNE, FL 329362342

Title: D (X) Delete
Name: WENDY, MOSELY
Address: PO BOX 362342
City-St-Zip: MELBOURNE, FL 329362342

Title: D () Delete
Name: CRYSTAL, STINNETT
Address: PO BOX 362342
City-St-Zip: MELBOURNE, FL 329362342

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD H FRAHM

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date