

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003697

FILED
Mar 20, 2009
Secretary of State

Entity Name: THE REMNANT SEED MINISTRIES, INC.

Current Principal Place of Business:

21202 OLEAN BLVD.
UNIT B1 & B6
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

1481 KENMORE ST
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 65-1078556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVILA, JOSE N
1481 KENMORE ST
PORT CHARLOTTE, FL 33952 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: S () Delete
Name: LINDBACK, KATHY
Address: 2240 LION TR
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T () Delete
Name: WEINRICH, STACI
Address: 21060 MALDEN AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: LINDBACK, CHARLES
Address: 2240 LION TR
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: M () Delete
Name: DAVILA, JODY
Address: 1481 KENMORE ST
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: PITTS, WILLIAM
Address: 876 BOUNDARY BLVD
City-St-Zip: ROTONDA WEST, FL 33947

Title: D () Delete
Name: RODRIGUEZ, ROGER
Address: 541 E TARPON BLVD
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: VILLAHERMOSA, DAMARIS
Address: 3083 WENONA DR
City-St-Zip: NORTH PORT, FL 34288

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: DAMARIS VILLAHERMOSA

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date