

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003730

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: GOSPEL FOR ALL MINISTRY, INC.

**Current Principal Place of Business:**

7724 BELVOIR DR.  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

7724 BELVOIR DR.  
ORLANDO, FL 32835

**New Mailing Address:**

FEI Number: 02-0690917      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BENOIT, JEAN-CLAUDE  
7724 BELVOIR DR.  
ORLANDO, FL 32835      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: BENOIT, JEAN-CLAUDE  
Address: 7724 BELVOIR DR.  
City-St-Zip: ORLANDO, FL 32835

Title: ASD      ( ) Delete  
Name: TOUSSAINT, LUNISE  
Address: 7724 BELVOIR DR.  
City-St-Zip: ORLANDO, FL 32835

Title: VD      ( ) Delete  
Name: NOREY, HENRI  
Address: 2950 NW 45 LANE  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: VD      ( ) Delete  
Name: DAGRIN, NADIA  
Address: 1703 BENCOVE CT.  
City-St-Zip: ORLANDO, FL 32835

Title: TD      ( ) Delete  
Name: EDNORD, DUVEILLAUME  
Address: 245 HALTWIG CT.  
City-St-Zip: ORLANDO, FL 32824

Title: ATD      ( ) Delete  
Name: DELAINDSE, LEON  
Address: 347 SERRARA CT.  
City-St-Zip: KISSIMMEE, FL 34758

**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: JEAN-CLAUDE BENOIT

PD

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date