

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010451

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: ELIJAH'S FATHERING MINISTRY, INC.

**Current Principal Place of Business:**

2185 NW 20TH STREET  
FORT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

9319 GARDEN OVERLOOK LANE  
JACKSONVILLE, FL 32219 US

**New Mailing Address:**

FEI Number: 54-2138059      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MATTHEWS, CLESTER E  
2185 NW 20TH STREET  
FORT LAUDERDALE, FL 33311 US

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

MATTHEWS, CLESTER E  
9319 GARDEN OVERLOOK LN  
JACKSONVILLE, FL 32219 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: DOROTHY MATTHEWS      04/28/2009  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MATTHEWS, CLESTER  
Address: 2185 NW 20TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: SDV ( ) Delete  
Name: MATTHEWS, DOROTHY  
Address: 22185 NW 20TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete  
Name: BROWN, JOYCE  
Address: 1681 E BAY ST  
City-St-Zip: WINTER GARDEN, FL 34787

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MATTHEWS, CLESTER  
Address: 9319 GARDEN OVERLOOK LN  
City-St-Zip: JACKSONVILLE, FL 32219

Title: SDV (X) Change ( ) Addition  
Name: MATTHEWS, DOROTHY  
Address: 9319 GARDEN OVERLOOK LN  
City-St-Zip: JACKSONVILLE, FL 32219

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: DOROTHY MATTHEWS      SDV      04/28/2009  
Electronic Signature of Signing Officer or Director      Date