2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# N93000002943

Entity Name: SOARING EAGLES INTERNATIONAL CHURCH MINISTRIES, INC.

Current Principal Place of Business:

1228 DIXON BLVD
COCOA, FL 32922 US

New Principal Place of Business:

Current Mailing Address:

400 HEATHROW CIR
ROCKLEDGE, FL 32955 US

New Mailing Address:

FEI Number: 59-3191091 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MORAGNE, ERNEST L
400 HEATHROW CIR
ROCKLEDGE, FL 32955 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: MORAGNE, ERNEST L
Address: 400 HEATHROW CIR
City-St-Zip: ROCKLEDGE, FL 32955

Title: VD ( ) Delete
Name: MORAGNE, JANET
Address: 400 HEATHROW CIR
City-St-Zip: ROCKLEDGE, FL 32955

Title: STD ( ) Delete
Name: LLYOD, CAMILLA
Address: 1525 S FISKE BLVD STE 240
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MORAGNE, ERNEST L
Address: 400 HEATHROW CIR
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: VD (X) Change ( ) Addition
Name: MORAGNE, JANET C
Address: 400 HEATHROW CIR
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: STD (X) Change ( ) Addition
Name: LLYOD, CAMILLA
Address: 1515 HUNTINGTON LN #114
City-St-Zip: ROCKLEDGE, FL 32955 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ERNEST L. MORAGNE PD 01/29/2007

Electronic Signature of Signing Officer or Director — Date