

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N96000000936

Entity Name: I AM MINISTRIES, INC.

Current Principal Place of Business:

1015 COMMERCE AVE
VERO BEACH, FL 32960 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2458
VERO BEACH, FL 329612458 US

New Mailing Address:

FEI Number: 59-3354241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, TOM
5525 16TH ST
VERO BEACH, FL 32966 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: DST () Delete
Name: SCHORNER, JAMES
Address: 150 CAMILIA CT
City-St-Zip: VERO BEACH, FL 32963

Title: DP () Delete
Name: KING, TOM
Address: 5525 16TH ST.
City-St-Zip: VERO BEACH, FL 32966

Title: DBM () Delete
Name: BECKLEY, JAMES
Address: 1864 WILDCAT CAUL
City-St-Zip: NORTH HUTCHINSON ISLAND, FL 34949

Title: DMB () Delete
Name: BATES, JON
Address: 380 MARBRISA DR.
City-St-Zip: INDIAN RIVER SHORES, FL 32963

Title: DC () Delete
Name: COLKITT, JAY
Address: 860 11TH ST
City-St-Zip: VERO BEACH, FL 32960

Title: DVP () Delete
Name: VANVYNCKT, PHILIP
Address: 951 OLD DIXIE HWY
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DBM (X) Change () Addition
Name: BECKLEY, JAMES
Address: 175 RIVERWAY DR
City-St-Zip: VERO BEACH, FL 32963

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: TOM KING

_____ Electronic Signature of Signing Officer or Director

DP

03/31/2009

_____ Date

N96000000936

**Filed
3/31/09**

I AM MINISTRIES, INC.
P O BOX 2458 VERO BEACH, FL 32961
772-564-0202

Date: March 31, 2009

To: Kathy w/Division of Corporations

Fax: 850-245-6017

From: Mary Brittan

Comment: The following board members need to be added to our Annual Report that I filed on line.

DBM Brian Adams
2055 Spring Place
Vero Beach, FL 32963

DBM Jim Crockett
81 Passage Island
Vero Beach, FL 32963

DBM Jim Baird
615 20th Ave
Vero Beach, FL 32962

DBM Lee Brubaker
3376 1st Lane
Vero Beach, FL 32968

If any other information is needed contact me at the above number on Tuesday afternoon as I only work one day a week.

Thank you for your assistance
Mary Brittan