

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Apr 30, 2009
Secretary of State**

DOCUMENT# N98000000177

Entity Name: SHRINE OF THE MASTER, INC.

Current Principal Place of Business:2710 BROWNING ST.
SARASOTA, FL 34237 US**New Principal Place of Business:****Current Mailing Address:**2710 BROWNING ST.
SARASOTA, FL 34237 US**New Mailing Address:**P.O. BOX 51959
SARASOTA, FL 34232 US

FEI Number: 65-0501429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:NEWMAN, THOMAS REV
C/O 2710 BROWNING ST
SARASOTA, FL 34237 US**Name and Address of New Registered Agent:**GRACZYK, ELAINE
4002 BARRY WAY
SARASOTA, FL 34232 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: ELAINE GRACZYK

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PRES () Delete
Name: CURTIN, KATHLEEN
Address: 1557 OAK VIEW DR
City-St-Zip: SARASOTA, FL 34232 USTitle: VP () Delete
Name: DUDLEY, TIMOTHY REV.
Address: 5316 ANGELES AVE
City-St-Zip: SARASOTA, FL 34235 USTitle: TRUS () Delete
Name: BENNETT, DON
Address: 225 5TH AVE NE #27
City-St-Zip: ST. PETERSBURG, FL 33701 USTitle: TRU () Delete
Name: NEWMAN, RICK
Address: 429 MEADOW LARK DR
City-St-Zip: SARASOTA, FL 34236 USTitle: TRU () Delete
Name: FLORIO, ALEX
Address: 1015 FRACESCA CT
City-St-Zip: PUNTA GORDA, FL 33950 USTitle: SEC () Delete
Name: MULDER, LYN
Address: 8750 MIDNIGHT PASS RD 600C
City-St-Zip: SARASOTA, FL 34242 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PRES (X) Change () Addition
Name: GRACZYK, ELAINE
Address: 4002 BARRY WAY
City-St-Zip: SARASOTA, FL 34232 USTitle: VP (X) Change () Addition
Name: BERNER, DOROTHY
Address: COPPENHAGEN STREET
City-St-Zip: SARASOTA, FL 34234 USTitle: D (X) Change () Addition
Name: JORDAN, KAREN
Address: 2136 HYDE PARK CIRCLE
City-St-Zip: SARASOTA, FL 34239 USTitle: T (X) Change () Addition
Name: MACLEOD, CAROL
Address: 4494 DEL SOL BLVD.
City-St-Zip: SARASOTA, FL 34243 USTitle: S (X) Change () Addition
Name: WALLACE, JEAN
Address: 3539 PRADO DRIVE
City-St-Zip: SARASOTA, FL 34239 USTitle: D (X) Change () Addition
Name: DESCHAMPS, SUZY REV.
Address: 8324 CYPRESS LAKES DRIVE
City-St-Zip: SARASOTA, FL 34243 US

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: ELAINE GRACZYK

MRS.

04/30/2009

Electronic Signature of Signing Officer or Director

Date