

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005406

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: L. ROBINSON-CONDESO MINISTRIES, INC.

**Current Principal Place of Business:**

1861 N. FEDERAL HWY  
#175  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

1861 N. FEDERAL HWY  
#175  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 65-0950516      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CONDESO, LILLIE M  
1861 N FEDERAL HIGHWAY  
#175  
HOLLYWOOD, FL 33020 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: PFD ( ) Delete  
Name: CONDESO, LILLIE M  
Address: 4620 SPRINGVALLEY RD  
City-St-Zip: EVANSVILLE, IN 47715

Title: D ( ) Delete  
Name: MICKENS, ALEENE L  
Address: 4536 SPRINGVALLEY RD  
City-St-Zip: EVANSVILLE, IN 47715

Title: DV ( ) Delete  
Name: CONDESO, JAVIER T  
Address: 4620 SPRINGVALLEY RD  
City-St-Zip: EVANSVILLE, IN 47715

Title: D ( ) Delete  
Name: MICKENS, ISIAK M  
Address: 520 WEINBACH AVE  
City-St-Zip: EVANSVILLE, IN 47715

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

Title: PFD (X) Change ( ) Addition  
Name: CONDESO, LILLIE M  
Address: 498 N.E. 78TH STREET, #3  
City-St-Zip: MIAMI, FL 33168

Title: D (X) Change ( ) Addition  
Name: MICKENS, ALEENE L  
Address: 498 N. E. 78TH STREET, #1A  
City-St-Zip: MIAMI, FL 33168

Title: DV (X) Change ( ) Addition  
Name: CONDESO, JAVIER T  
Address: 498 N.E. 78TH STREET, #3  
City-St-Zip: MIAMI, FL 33168

Title: D (X) Change ( ) Addition  
Name: MICKENS, ISIAK M  
Address: 7001 N W 16TH STREET, APT. 316  
City-St-Zip: PLANTATION, FL 33313

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: LILLIE M. CONDESO

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PFD

04/30/2008

\_\_\_\_\_ Date