

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006502

FILED
Sep 05, 2007
Secretary of State

Entity Name: KEEPING IT REAL HELP! MINISTRIES, INCORPORATED

Current Principal Place of Business:

2411 N 98TH
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

1919 NW 10TH ST
#24
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 56-2284281 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRAZELL, MARIA T
101 LEELON ROAD
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

BRAZELL, MARIA T
6150 NE 72ND CIRCLE W#16
OKEECHOBEE, FL 34974 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: MARIA BRAZELL

09/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRAZELL, MARIA
Address: 101 LEELON ROAD
City-St-Zip: LAKELAND, FL 33809

Title: CEO () Delete
Name: LLOYD, ERIC APOSTLE
Address: 105 LEELON RD
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: SIMMS, JUANITA D
Address: 387 EAST FRANKLIN STREET
City-St-Zip: OVIEDO, FL 32762

Title: D () Delete
Name: ROLLE, MICHELLE
Address: 107 LEELON RD
City-St-Zip: LAKELAND, FL 33809

Title: SD () Delete
Name: MASON, SHARON
Address: 1919 NW 10TH ST APT 24
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: WILLIAMS, THOMAS REV
Address: 2000 WHITE SAND DRIVE
City-St-Zip: TITUSVILLE, FL 32780

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRAZELL, MARIA
Address: 6150 NE 72ND CIRCLE W
City-St-Zip: OKEECHOBEE, FL 34974

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

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

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: MARIA BRAZELL

P

09/05/2007

Electronic Signature of Signing Officer or Director

Date