

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007832

FILED
Feb 14, 2009
Secretary of State

Entity Name: SERVANT INTERNATIONAL, INC.

Current Principal Place of Business:

103 JOSHUA CT
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

103 JOSHUA CT
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 33-1064846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FAIRO, PENNY
103 JOSHUA CT
AUBURNDALE, FL 33823 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: FAIRO, PENNY
Address: PO BOX 151326
City-St-Zip: ALTAMONTE SPRINGS, FL 32715

Title: VD () Delete
Name: KRANING KARP, SABRINA
Address: 11 RANCH RD
City-St-Zip: EIGHTY FOUR, PA 15330

Title: SD () Delete
Name: STAMEY, DIANE
Address: 103 JOSHUA CT.
City-St-Zip: AUBURNDALE, FL 33823

Title: DIR () Delete
Name: HOLDER, RAY
Address: 722 32ND ST
City-St-Zip: ORLANDO, FL 32805

Title: DIR () Delete
Name: HOLDER, LIBBY
Address: 722 32ND ST
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PENNY FAIRO

PD

02/14/2009

Electronic Signature of Signing Officer or Director

_____ Date