2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740169

FILED Jun 15, 2009 Secretary of State

Entity Name: SONSHINE VIA DE CRISTO MOVEMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

254 CURTISS PKY

MIAMI SPRINGS, FL 33166

Current Mailing Address: New Mailing Address:

254 CURTISS PKY MIAMI SPRINGS, FL 33166

FEI Number: 59-1789554 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: Name and Address of New Registered Agent:

KOVACH, BEVERLY
709 CURTISS PKWY #12
709 CURTISS PKWY

MIAMI SPRINGS, FL 33166 US 12 MIAMI SPRINGS. FL 33166 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: 06/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VD () Delete Title: LD (X) Change () Addition

 Name:
 PRATT, JOE
 Name:
 LARKIN, BETTY

 Address:
 4111 SANTA BARBARA DR
 Address:
 4241 NW 190TH STREET

 City-St-Zip:
 SEBRING, FL 33875
 City-St-Zip:
 MIAMI, FL 33055

Title: VD () Delete Title: LD (X) Change () Addition

 Name:
 ARMBRUST, DONALD
 Name:
 ARMBRUST, DONALD

 Address:
 1845 NW 93 WAY
 Address:
 1845 NW 93 WAY

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:
 PLANTATION, FL 33322

Title: TD () Delete Title: TREA (X) Change () Addition

 Name:
 KOVACH, BEVERLY
 Name:
 KOVACH, BEVERLY

 Address:
 254 CURTISS PKWY
 Address:
 709 CURTISS PKWY #12

 City-St-Zip:
 MIAMI SPRINGS, FL 33166
 City-St-Zip:
 MIAMI SPRINGS, FL 33166

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 MCADEN, ANDRE

 Address:
 Address:
 8790 HOLLY CT #101

 City-St-Zip:
 City-St-Zip:
 TAMARAC, FL 33321

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: BEVERLY KOVACH TREA 06/15/2009