2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# F08000001694

Entity Name: ELDER SOURCE SENIOR MINISTRIES INTERNATIONAL INCORPORATED

Current Principal Place of Business:

275 COMMONWEALTH DR.
GREENVILLE, SC 29615

New Principal Place of Business:

Current Mailing Address:

PO BOX 4848
GREENVILLE, SC 29608

New Mailing Address:

FEI Number: 68-0649516 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE. 4
WESTON, FL 33331 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: CP ( ) Delete
Name: MEANS, STAN
Address: 71 DEVONHALL WAY
City-St-Zip: TAYLORS, SC 29687

Title: VCVP ( ) Delete
Name: BENANTI, JOE
Address: 305 STONEDALE DR.
City-St-Zip: SIMPSONVILLE, SC 29681

Title: DS ( ) Delete
Name: HARKEY, ALAN
Address: 300 BIRKENSTOCK CT
City-St-Zip: SIMPSONVILLE, SC 29681

Title: T ( ) Delete
Name: BENANTI, JOE
Address: 305 STONEDALE DR.
City-St-Zip: SIMPSONVILLE, SC 29681

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:

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: STAN R MEANS PRES 01/15/2009

Electronic Signature of Signing Officer or Director — Date