

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000689

FILED
May 06, 2009
Secretary of State

Entity Name: THE ASSOCIATION OF MESSIANIC BELIEVERS, INC.

Current Principal Place of Business:

3190 GULF-TO-BAY BLVD
CLEARWATER, FL 337594505

New Principal Place of Business:

Current Mailing Address:

3190 GULF-TO-BAY BLVD
CLEARWATER, FL 337594505

New Mailing Address:

FEI Number: 76-0378958 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:

FISCHER, JOHN DR
3190 GULF-TO-BAY BLVD
CLEARWATER, FL 34619 US

Name and Address of New Registered Agent:

FISCHER, JOHN DR
3190 GULF-TO-BAY BLVD
CLEARWATER, FL 33579 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:

Electronic Signature of Registered Agent

05/06/2009

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FISCHER, JOHN DR
Address: 3190 GULF-TO-BAY BOULEVARD
City-St-Zip: CLEARWATER, FL 337594505

Title: VPD () Delete
Name: STOKES, BRUCE DR
Address: 5455 GARDEN GROVE BLVD SUITE 144
City-St-Zip: WESTMINSTER, CA 92683

Title: SD () Delete
Name: SEDACA, DAVID
Address: 184 PROSPECT PARK, W. BSMT
City-St-Zip: BROOKLYN, NY 112157048

Title: TD () Delete
Name: FORBES, JASON
Address: 13001 37TH AVENUE SOUTH
City-St-Zip: SEATTLE, WA 98168

Title: D () Delete
Name: RUSSELL, RESNIK
Address: 529 JEFFERSON ST NE
City-St-Zip: ALBUQUERQUE, NM 87108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: FISCHER, JOHN DR
Address: 3190 GULF-TO-BAY BOULEVARD
City-St-Zip: CLEARWATER, FL 337594505

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

Title: PD (X) Change () Addition
Name: SEDACA, DAVID
Address: 184 PROSPECT PARK, W. BSMT
City-St-Zip: BROOKLYN, NY 112157048

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: JOHN FISCHER

Electronic Signature of Signing Officer or Director

DR.

05/06/2009

Date