

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000100540

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** SPIRITUAL TRANSFORMATION LEADERSHIP INSTITUTE, LLC

**Current Principal Place of Business:**

222 BRIGHTON F  
BOCA RATON, FL 33434 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 812405  
BOCA RATON, FL 33481 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ELLIOTT, SONIA B  
222 BRIGHTON F  
BOCA RATON, FL 33434 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ELLIOTT, SONIA B  
Address: 222 BRIGHTON F  
City-St-Zip: BOCA RATON, FL 33434 US

Title: MGRM ( ) Delete  
Name: ELLIOTT CONSULTING & COUNSELING SERVICES,  
Address: PO BOX 812405  
City-St-Zip: BOCA RATON, FL 33481 US

Title: MGRM ( ) Delete  
Name: LIVING WATERS RENAISSANCE, INC  
Address: PO BOX 812405  
City-St-Zip: BOCA RATON, FL 33434 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ELLIOTT, SONIA B DR.  
Address: 222 BRIGHTON F  
City-St-Zip: BOCA RATON, FL 33434 US

Title: MGRM (X) Change ( ) Addition  
Name: LIVING WATERS RENAISSANCE, INC  
Address: PO BOX 812405  
City-St-Zip: BOCA RATON, FL 33481 US

Title: MGRM (X) Change ( ) Addition  
Name: ASCENSION GLOBAL MINISTRIES, INC  
Address: PO BOX 812405  
City-St-Zip: BOCA RATON, FL 33434 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DR. SONIA ELLIOTT

PRES

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date