2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# L08000051961

Entity Name: NELSON FELICIANO MINISTRY, LLC

Current Principal Place of Business:

182 PALM BEACH PLANTATION BLVD
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

182 PALM BEACH PLANTATION BLVD
ROYAL PALM BEACH, FL 33411

New Mailing Address:

P. O. BOX 211285
ROYAL PALM BEACH, FL 33421

FEI Number: 26-2687007 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURGOS FELICIANO, NELSON
182 PALM BEACH PLANTATION BLVD
ROYAL PALM BEACH, FL 33411 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: BURGOS FELICIANO, NELSON
Address: 182 PALM BEACH PLANTATION BLVD
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: MGRM ( ) Delete
Name: ROJAS, LUIS
Address: 182 PALM BEACH PLANTATION BLVD
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES:

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

Title: TREA (X) Change ( ) Addition
Name: ROJAS, LUIS
Address: 182 PALM BEACH PLANTATION BLVD
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: NELSON BURGOS FELICIANO MGR 04/23/2009

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