

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000811

FILED
May 01, 2009
Secretary of State

Entity Name: THE SPIRIT OF THE LORD MINISTRY CHURCH, INC.

Current Principal Place of Business:

140 E 4TH ST
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 40246
JACKSONVILLE, FL 32203

New Mailing Address:

FEI Number: 59-3624866 **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:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PTD () Delete
Name: MOSELY, BEN JR
Address: 140 E 9TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: V () Delete
Name: MOSELY, CYNTHIA
Address: 140 E 9TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: S () Delete
Name: MOSELY, TRAVIS T
Address: 8158 AMBERWOOD CT
City-St-Zip: JACKSONVILLE, FL 32244

Title: T () Delete
Name: MOSELY, BEN JR.
Address: 140 E 9TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: MOSELY, TRAVIS T
Address: 8158 AMBERWOOD CT
City-St-Zip: JACKSONVILLE, FL 32244

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:

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: CYNTHIA MOSELY

V

05/01/2009

Electronic Signature of Signing Officer or Director

Date