

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001885

FILED  
Sep 08, 2005  
Secretary of State

**Entity Name:** RESTORATION EVANGELISTIC MINISTRIES INTERNATIONAL INC.

**Current Principal Place of Business:**

8185 S CORAL CIR.  
N. LAUDERDALE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

8185 S CORAL CIR.  
N. LAUDERDALE, FL 33068

**New Mailing Address:**

**FEI Number:** 65-0989742      **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:**

MCPHERSON, LETITIA REV  
8185 S CORAL CIR.  
N. LAUDERDALE, FL 33068      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: P      ( ) Delete  
Name: MCPHERSON, LETITIA  
Address: 8185 S CORAL CIR.  
City-St-Zip: N. LAUDERDALE, FL 33068

Title: D      ( ) Delete  
Name: BAYNE, EDINA  
Address: 3921 N.W. 45TH TERRACE  
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: D      ( ) Delete  
Name: WILLIAMS, MELVIN  
Address: 640 8168 W. MCNAB ROAD  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: D      ( ) Delete  
Name: BLAIR, NADINE  
Address: 4121 NW 7TH AVE.  
City-St-Zip: NORTH LAUDERDALE, FL 33068

**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 for the exemption stated in Section 119.07(3)(i), 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: LETITIA MCPHERSON

PRES

09/08/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date