

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004818

FILED
Feb 04, 2008
Secretary of State

Entity Name: SOUTH SANTA ROSA INTERFAITH MINISTRIES, INC.

Current Principal Place of Business:

4339 GULF BREEZE PKWY
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

4339 GULF BREEZE PKWY
GULF BREEZE, FL 32563

New Mailing Address:

4435 GULF BREEZE PKWY
GULF BREEZE, FL 32563

FEI Number: 59-3690750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNETT, SHIRLEY E
4339 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

CORNETT, SHIRLEY E
4435 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 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: SHIRLEY E. CORNETT

02/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: BLACKLAW, JERRY DR.
Address: POST OFFICE BOX 130
City-St-Zip: GULF BREEZE, FL 32562

Title: D () Delete
Name: RANDLE, CHARLES E DR.
Address: VIA DE LUNA AT AVENIDA 18
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: HUNT, LUKE
Address: POST OFFICE BOX 1057
City-St-Zip: GULF BREEZE, FL 32562

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:

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: SHIRLEY E. CORNETT

MRS.

02/04/2008

Electronic Signature of Signing Officer or Director

Date