## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000005585

Entity Name: SOZO MINISTRIES, INCORPORATED

FILED Aug 14, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

6131 TERRY ROAD 123 MAGNOLIA BLUFF AVE JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32211

**Current Mailing Address: New Mailing Address:** 

PO BOX 8643

JACKSONVILLE, FL 32239

FEI Number: 59-3688408 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: Name and Address of New Registered Agent:

MAILLET, ELYETTE C MAILLET, ELYETTE C 5800 BEÁCH BLVD # 203-349 6131 TERRY RD JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32207 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: ELYETTE-CLAIRE MAILLET 08/14/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete ELLIS, SHARON E Name: Name:

Address: 3442 VICTORIA PARK ROAD Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition MAILLET, PATRICK P Name: Name: AMSTUTZ, JOHN R

Address: 5800 BEACH BLVD #203 Address: 5800 BEACH BLVD # 203-349 City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32207

Title: () Delete Title: (X) Change ( ) Addition MAILLET, ELYETTE C Name: MAILLET, ELYETTE C Name:

6131 TERRY RD 5800 BEACH BLVD # 203-349 Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32239

Title: (X) Delete Title: () Change () Addition

Name: MAILLET, P. ELIE Name: Address: 6131 TERRY RD Address: City-St-Zip: JACKSONVILLE, FL 32216 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.

Ρ SIGNATURE: ELYETTE MAILLET 08/14/2009