

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2008 8:00 am
Secretary of State

07-03-2008 90014 008 ****61.25

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1. Entity Name
EAGLE WINGS INTERNATIONAL MINISTRIES, INC.



Principal Place of Business
**1000 SOUTH DIXIE HWY. WEST
POMPANO BEACH, FL 33060**

Mailing Address
**PO BOX 1327
FT. LAUDERDALE, FL 33311**



2. Principal Place of Business - No P.O. Box #
3624 W. Broward Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06272008 Chg-NP CR2E037 (12/06)

City & State

Fort Lauderdale, FL

City & State

4. FEI Number
65-1036923

Applied For
Not Applicable

Zip
33312

Country
US

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BOSKET, BARBARA
742 N.W. 3RD AVE
FT LAUDERDALE, FL 33311**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	BOSKET, BARBARA	742 NW 3RD AVE	FT LAUDERDALE, FL 33311	<input type="checkbox"/>
D	BOSKET, NATHAN	742 NW 3RD AVE	FT LAUDERDALE, FL 33311	<input type="checkbox"/>
D	MOFFAH, KAMESHA	1505 SW 2ND ST #201	FORT LAUDERDALE, FL 33312	<input type="checkbox"/>
D	COREY, TONIA	19344 SW 66 ST	FORT LAUDERDALE, FL 33332	<input checked="" type="checkbox"/>
D	RICHIE, KENYA	2701 NW 39TH AVE #202	FORT LAUDERDALE, FL 33311	<input type="checkbox"/>
D	HOWELL, LORRAINE	221 NW 11 AVE #2	FORT LAUDERDALE, FL 33311	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>
				<input type="checkbox"/>
	MOFFAH, KAMESHA	1505 SW 2ND St. 201	Fort Lauderdale, FL 33312	<input checked="" type="checkbox"/>
	Carol Prescott	5905 N.W. 23 St.	lauderdale, FL 33313	<input checked="" type="checkbox"/>
	Richie, Kenya	2701 N.W. 39th Ave #202	Fort Lauderdale, FL 33311	<input checked="" type="checkbox"/>
	Teresa Parrish	4810 N.W. 8th Drve	Plantation, FL 33317	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Barbara Bosket
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/27/08 *954-990-4685*
Date Daytime Phone #