2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000006680

FILED Sep 03, 2008 Secretary of State

Entity Name: LATTER RAIN FAMILY WORSHIP CENTER, INC.

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

13099 SW 21 STREET 9600 MIRAMAR BOULEVARD

MIRAMAR, FL 33027 MIRAMAR, FL 33025

Current Mailing Address: New Mailing Address:

13099 SW 21 STREET 9740 MILL POND DRIVE MIRAMAR, FL 33027 MIRAMAR, FL 33025

FEI Number: 65-1046993 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:

ROBERTS, CAL X
9740 MILL POND DR.
MIRAMAR, FL 33025 US

ROBERTS, CAL X
9740 MILL POND DRIVE
MIRAMAR, FL 33025 US

MIRAMAR, FL 33025 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: CAL X ROBERTS 09/03/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition Name: ROBERTS, CAL X ROBERTS, CAL X

 Name
 Nobel(15, GAE X)

 Address:
 9740 MILL POND DR.

 City-St-Zip:
 MIRAMAR, FL 33025

 Address:
 9740 MILL POND DR.

 City-St-Zip:
 MIRAMAR, FL 33025

Title: D () Delete Title: VP (X) Change () Addition Name: ROBERTS, RENEE L ROBERTS, RENEE L

 Name:
 ROBERTS, RENEE L
 Name:
 ROBERTS, RENEE L

 Address:
 9740 MILL POND DR.
 Address:
 9740 MILL POND DR.

 City-St-Zip:
 MIRAMAR, FL 33025
 City-St-Zip:
 MIRAMAR, FL 33025

Title: D () Delete Title: () Change () Addition

 Name:
 SMITH, WILL
 Name:

 Address:
 1731 SW 86TH AVE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33025
 City-St-Zip:

 Name:
 SMITH, WENDY
 Name:
 SMITH, WENDY

 Address:
 1731 SW 86TH AVE
 Address:
 1731 SW 86TH AVE

 City-St-Zip:
 MIRAMAR, FL 33025
 City-St-Zip:
 MIRAMAR, FL 33025

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: RENEE ROBERTS VP 09/03/2008