

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007729

FILED
Apr 15, 2009
Secretary of State

Entity Name: STRONG TOWER MINISTRIES, INC.

Current Principal Place of Business:

4200 NW 16 STREET
606
LAUDERHILL, FL 33313

New Principal Place of Business:

3363 N PINE ISLAND ROAD
SUNRISE, FL 33351

Current Mailing Address:

P.O. BOX 190430
FORT LAUDERDALE, FL 33319

New Mailing Address:

FEI Number: 65-0897496 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRASER, COURTNEY
9341 NW 33 MANOR
SUNRISE, FL 33351 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: PD () Delete
Name: FRASER, COURTNEY
Address: 9341 NW 33 MANOR
City-St-Zip: SUNRISE, FL 33351

Title: TD () Delete
Name: KNIGHT, SONIA
Address: 8540 NW 53RD COURT
City-St-Zip: LAUDERHILL, FL 33351

Title: D () Delete
Name: REMY, PAUL
Address: 6250 NW 14TH PLACE
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: SUER, NORMAN
Address: 2470 NW 64TH AVENUE
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: GORDON, EUCASTER
Address: 9449 NW 45TH PLACE
City-St-Zip: SUNRISE, FL 33351

Title: SD (X) Delete
Name: FRASER, CHRISTINA
Address: 9341 NW 33 MANOR
City-St-Zip: SUNRISE, FL 33351

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: SD (X) Change () Addition
Name: FRASER, CHRISTINA
Address: 9341 NW 33 MANOR
City-St-Zip: SUNRISE, FL 33351

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: COURTNEY FRASER

SD

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date