

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 05, 2007 08:00 AM

Secretary of State

DOCUMENT # N01000001190

1. Entity Name

RISEN MESSIAH MINISTRIES, INC.



Principal Place of Business

**2980 JOG RD
LAKE WORTH FL 33463**

Mailing Address

**PO BOX 541984
LAKE WORTH FL 33454-1984**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1090903

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DOLPHUS, GARY SR
7881 PEBBLE BEACH CT.
LAKE WORTH FL 33467**

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

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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: PVP ☐ Delete
NAME: DOLPHUS, GARY SR
STREET ADDRESS: 7881 PEBBLE BEACH CT.
CITY-STATE-ZIP: LAKE WORTH FL 33467

TITLE: ST ☐ Delete
NAME: DOLPHUS, PATRICIA A
STREET ADDRESS: 7881 PEBBLE BEACH CT.
CITY-STATE-ZIP: LAKE WORTH FL 33467

TITLE: D ☐ Delete
NAME: PIERRE, ESPERANDIEU
STREET ADDRESS: PO BOX 15665
CITY-STATE-ZIP: WEST PALM BCH FL 33461

TITLE: D ☐ Delete
NAME: WALDRON, HUBERT
STREET ADDRESS: 120 SHERWOOD CIR STE 9-D
CITY-STATE-ZIP: JUPITER FL 33458

TITLE: D ☐ Delete
NAME: WALDRON, JACINTH
STREET ADDRESS: 120 SHERWOOD CIR STE 9-D
CITY-STATE-ZIP: JUPITER FL 33458

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP: U00000621742
02/12/07-80029-005 61.25

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

P.A. Dolphus / P.A. Dolphus

2/1/07

361-966-0780