

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001851

Entity Name: SPIRITUAL IMPACT, INC.

FILED
Aug 30, 2007
Secretary of State

Current Principal Place of Business:

2651 MADISON ST.
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 99-8882
MIAMI, FL 33299

New Mailing Address:

FEI Number: 65-1088165 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:

LANG, LISA
1410 NW 175TH ST.
MIAMI, FL 33169 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: D () Delete
Name: LANG, LISA
Address: 1410 NW 175TH ST.
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: WILSON, KERRY
Address: 314 SW 8TH ST.
City-St-Zip: DELRAY BCH, FL 33444

Title: D () Delete
Name: THAMES, MICHELLE
Address: 2651 MADISON ST.
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: MARTIN, LEON JR.
Address: 2331 E. GULF DR.
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: THAMES, MICHELLE R
Address: 2651 MADISON ST.
City-St-Zip: HOLLYWOOD, FL 33020

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: MICHELLE R. THAMES

D

08/30/2007

Electronic Signature of Signing Officer or Director

Date