

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002929

FILED
Feb 19, 2007
Secretary of State

Entity Name: AWAKENING TRUE VINE INTERNATIONAL OUTREACH MINISTRIE INC.

Current Principal Place of Business:

409 NW 14TH WAY
FT LAUDERDALE, FL 33311

New Principal Place of Business:

2328 SW DODGE TER
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

409 NW 14TH WAY
FT LAUDERDALE, FL 33311 US

New Mailing Address:

2328 SW DODGE TER
PORT SAINT LUCIE, FL 34953 US

FEI Number: 65-1093392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARCHMENT, LOIS J
409 NW 14TH WAY
FT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

PARCHMENT, LOIS J APOSTLE
2328 SW DODGE TER
PORT SAINT LUCIE, FL 34953 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: LOIS J. PARCHMENT

02/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPT () Delete
Name: JOHNSON, BETSEY
Address: 409 NW 14TH WAY
City-St-Zip: FT LAUDERDALE, FL 33311 US

Title: CST () Delete
Name: HILL, ALMA
Address: 1701 NW 6TH COURT - APT#2-207
City-St-Zip: FT LAUDERDALE, FL 33311 US

Title: T () Delete
Name: ANTHONY, DEVOE
Address: 409 NW 14TH WAY
City-St-Zip: FT LAUDERDALE, FL 33311 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PARCHMENT, LOIS J APOSTLE
Address: 2328 SW DODGE TER
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: T (X) Change () Addition
Name: HILL, ALMA
Address: 1701 NW 6TH COURT - APT#2-207
City-St-Zip: FT LAUDERDALE, FL 33311 US

Title: AST (X) Change () Addition
Name: WANDA, WILCOX ADMIN
Address: 18401 NW 43RD COURT
City-St-Zip: MIAMI GARDENS, FL 33055 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LOIS J. PARCHMENT

PD

02/19/2007

Electronic Signature of Signing Officer or Director

Date