

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002963

FILED
Apr 29, 2007
Secretary of State

Entity Name: FREEDOM INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

2480 LAKE OSBOURNE DR
APT 208A
LAKE WORTH, FL 33461

New Principal Place of Business:

2480 LAKE OSBORNE DR
APT 208A
LAKE WORTH, FL 33461

Current Mailing Address:

2480 LAKE OSBOURNE DR
APT 208A
LAKE WORTH, FL 33461

New Mailing Address:

2480 LAKE OSBORNE DR
APT 208A
LAKE WORTH, FL 33461

FEI Number: 65-1119540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTERA, KAREN A
2480 LAKE OSBOURNE DR
APT 208A
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

BUTERA, KAREN A
2480 LAKE OSBORNE DR
APT 208A
LAKE WORTH, FL 33461 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: KAREN A BUTERA

04/29/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUTERA, KAREN A
Address: 2480 LAKE OSBORNE DR #208A
City-St-Zip: LAKE WORTH, FL 33461

Title: VD () Delete
Name: JACKSON, NERISSA E
Address: 1101 CHORUS WAY
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: STD () Delete
Name: SMITH, FRANZISKA
Address: 6140 BARBARA ST.
City-St-Zip: JUPITER, FL 33458

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:

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: KAREN A BUTERA

PD

04/29/2007

Electronic Signature of Signing Officer or Director

Date