2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N01000006302

Entity Name: FL. APOSTOLIC ARK PENTECOSTAL MINISTRIES, INC.

Current Principal Place of Business:

6800 SUNSET STRIP
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

7481 SUNSET STRIP
SUNRISE, FL 33313

New Mailing Address:

6800 SUNSET STRIP
SUNRISE, FL 33313

FEI Number: 65-1137631 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKER, DELROY E
7481 SUNSET STRIP
SUNRISE, FL 33313 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:	P	( ) Delete
Name:	BAKER, DELROY E	
Address:	7481 SUNSET STRIP	
City-St-Zip:	SUNRISE, FL 33313	
Title:	V	( ) Delete
Name:	JOHNSON, GEOFFORY W	
Address:	22-24 & 27 HUNTLEY AVE	
City-St-Zip:	BROWN'S TOWN, ST. ANN, JA JAMAICA WI	
Title:	S/D	( ) Delete
Name:	BAKER, YVONNE L	
Address:	7481 SUNSET STRIP	
City-St-Zip:	SUNRISE, FL 33313	
Title:	D/T	( ) Delete
Name:	BENNETT, CARLTON	
Address:	7080 COPENHAGEN ROAD, UNIT #83	
City-St-Zip:	MISSISSAUGA, ONTARIO, CD L5N2C9 CD	
Title:	D/T	( ) Delete
Name:	BAKER, DELROY E	
Address:	7481 SUNSET STRIP	
City-St-Zip:	SUNRISE, FL 33313 US	
Title:	T/D	( ) Delete
Name:	GREEN, CYRUS	
Address:	4926 NW 95TH AVENUE, #24B	
City-St-Zip:	SUNRISE, FL 33351 US	

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:	( ) 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: DELROY E. BAKER D/T 04/28/2009

Electronic Signature of Signing Officer or Director — Date