

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006767

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** DIMENSIONS INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

402 LARGOVISTA DR.  
OAKLAND, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

402 LARGOVISTA DR.  
OAKLAND, FL 34787

**New Mailing Address:**

**FEI Number:** 59-3747867

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARRIS, LORETTA V  
402 LARGOVISTA DR.  
OAKLAND, FL 34787 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  
Name: HARRIS, LORETTA V  
Address: 402 LARGOVISTA DR.  
City-St-Zip: OAKLAND, FL 34787

Title: D  
Name: CLEMENT, MICHAEL  
Address: 4113 S SEMORAN BLVD #4  
City-St-Zip: ORLANDO, FL 32822

Title: D  
Name: BLUE, MERCEDES  
Address: 4408 EDGEMOORE AVE  
City-St-Zip: DELTONA, FL 32817

Title: D  
Name: VANN, DONNA  
Address: 7018 IRONWOOD DR  
City-St-Zip: ORLANDO, FL 32818

Title: D  
Name: HOLMES, PAULA  
Address: 40716 S RIO GRANDE #30  
City-St-Zip: ORLANDO, FL 32839

I hereby 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 all other like empowered.

SIGNATURE: LORETTA V HARRIS

OWNE

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date