

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2007 8:00 am**  
**Secretary of State**

01-31-2007 90043 008 \*\*\*\*61.25

<b>DOCUMENT # N01000007355</b>						
<b>1. Entity Name</b> RIVER OF LIFE FELLOWSHIP MINISTRIES, INC.						
<b>Principal Place of Business</b> 805 Sapodilla Dr <del>1046 SEBASTIAN ROAD</del> BAREFOOT BAY, FL 32976		<b>Mailing Address</b> 805 Sapodilla Drive <del>1046 SEBASTIAN ROAD</del> BAREFOOT BAY, FL 32976				
<b>2. Principal Place of Business - No P.O. Box #</b> 805 Sapodilla Dr Suite, Apt. #, etc.		<b>3. Mailing Address</b> 805 Sapodilla Drive Suite, Apt. #, etc.				
<b>City &amp; State</b> Barefoot Bay, FL		<b>City &amp; State</b> BAREFOOT Bay, FL		<b>4. FEI Number</b> 59-3728616		
<b>Zip</b> 32976		<b>Country</b> USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
<b>6. Name and Address of Current Registered Agent</b> MORINE, JOHN D 805 SAPADILLA DRIVE BAREFOOT BAY, FL 32976			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL</span> Zip Code			
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>						
<b>SIGNATURE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>						
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		<b>9. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>		
<b>Make check payable to Florida Department of State</b>						
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>			
<b>TITLE</b> D	<b>NAME</b> MORINE, JOHN D		<input type="checkbox"/> Delete	<b>TITLE</b> D	<b>NAME</b> MORINE, ALISON	
<b>STREET ADDRESS</b> <del>1046 SEBASTIAN ROAD</del>	805 Sapodilla Drive		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>STREET ADDRESS</b> <del>1046 SEBASTIAN ROAD</del>	805 Sapodilla Drive	
<b>CITY - ST - ZIP</b> BAREFOOT BAY, FL 32976			<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>CITY - ST - ZIP</b> BAREFOOT BAY, FL 32976		
<b>TITLE</b> D	<b>NAME</b> ALFORD, MUSE		<input type="checkbox"/> Delete	<b>TITLE</b> Director	<b>NAME</b> Salvatore R. Rizzi	
<b>STREET ADDRESS</b> 7870 FOX HUNTER CIRCLE	MICCO, FL 32978		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>STREET ADDRESS</b> 448 Arbor Street	Sebastian, FL 32958-4572	
<b>CITY - ST - ZIP</b> MICCO, FL 32978			<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>CITY - ST - ZIP</b> Sebastian, FL 32958-4572		
<b>TITLE</b> D	<b>NAME</b> ALFORD, MUSE		<input type="checkbox"/> Delete	<b>TITLE</b> D	<b>NAME</b> ALFORD, MUSE	
<b>STREET ADDRESS</b> 7870 FOX HUNTER CIRCLE	MICCO, FL 32978		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>STREET ADDRESS</b> 7870 FOX HUNTER CIRCLE	MICCO, FL 32978	
<b>CITY - ST - ZIP</b> MICCO, FL 32978			<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>CITY - ST - ZIP</b> MICCO, FL 32978		
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>						
<b>SIGNATURE:</b> <u>John D. Morine</u>			1/29/07			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>			
772-559-1372			<small>Daytime Phone #</small>			