2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # N01000008973

1. Entity Name

ALIVÉ IN CHRIST MINISTRIES, INC.



FILED Jan 22, 2007 08:00 AM **Secretary of State**

Principal Place of Business

31 SW 84TH ST GAINESVILLE, FL 32605 Mailing Address

31 SW 84TH ST GAINESVILLE, FL 32605



01182007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 26-0013741

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GALASSO, DANIEL R 31 SW 84TH STREET GAINESVILLE, FL 32607

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В.	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. In	am familiar with, a	nd accept
	the obligations of registered agent		
SI	IGNATI PE		

(NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000598702 01/24/07-80085-011 61.25

	Due by may 1, 2007		
10.	OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GALASSO, ROBERT D 409 SHANGRI-LA CIRCLE EDGEWATER, FL 32132		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GALASSO, JOAN C 409 SHANGRI-LA CIRCLE EDGEWATER, FL 32132		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S YOUNG, MARCI 950 CR. 732 CHANCELLOR, AL 363167211		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GALASSO, DANIEL R 31 SW 84TH ST GAINESVILLE, FL 32605		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, JOE 18510 DETTERWOOD AVE TAMPA, FL 33647		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
13. I have by partify that the information appoiling with this filled does not explify for the			

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12. I hereby certify that the information supplied with this filling 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.

SIGNATURE: