2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007
Secretary of State

DOCUMENT# N01176

Entity Name: VERBO CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

4645 GUN CLUB RD
STE 8-9
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 190
KENNER, LA 70063 US

New Mailing Address:

FEI Number: 59-2465755 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REYES, MAURO
2564 DEER RUN TRAIL
LOXAHATCHEE, FL 33470 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:	TD	( ) Delete
Name:	FUNNELL, RICHARD W	
Address:	P.O. BOX 190	
City-St-Zip:	KENNER, LA 70063	
Title:	PD	( ) Delete
Name:	JANKOWIAK, JAMES P	
Address:	4200 COMMUNITY DRIVE APT 906	
City-St-Zip:	WEST PALM BEACH, FL 33409	
Title:	D	( ) Delete
Name:	TROLESE, ROBERT L	
Address:	APARTADO POSTAL #RP-37	
City-St-Zip:	MANAGUA, CA NICARAGUA	
Title:	SD	( ) Delete
Name:	DEGOLYER, JAMES A	
Address:	CASILLA 09-01-16496	
City-St-Zip:	GUAYAQUIL, SA ECUADOR	

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:	

I hereby certify that the information supplied with this filing does not qualify for the 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: ROGER P CRUZ ADM. 03/27/2007

Electronic Signature of Signing Officer or Director — Date