

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01176

FILED  
Mar 20, 2009  
Secretary of State

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 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 CRUZ

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

ADMI

03/20/2009

\_\_\_\_\_  
Date