2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001133

FILED Aug 26, 2009 Secretary of State

Entity Name: DEFENDER OF THE FAITH MINISTRIES UNORTHODOX MINISTRY OF YAHSHUA, INC.

Current Principal Place of Business: New Principal Place of Business: 820 CRESTWOOD ST. JACKSONVILLE, FL 32208 **Current Mailing Address: New Mailing Address:** 8184 GRAMPELL DRIVE JACKSONVILLE, FL 32221 FEI Number: 59-3736238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, JANICE A 8184 GRAMPELL DR. JACKSONVILLE, FL 32221 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition MALONE, RODNEY Name: Name: 820 CRESTWOOD ST. Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition TUTCOILLER, RACHELL Name: TUTWILLER, RACHELL Name: Address: 820 CRESTWOOD ST. Address: 820 CRESTWOOD ST. City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: JACKSONVILLE, FL 32208 Title: () Delete Title: () Change () Addition WILLIAMS, LESTER L JR Name: Name: 820 CRESTWOOD ST. Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: WILLIAMS, JANICE A Name: 820 CRESTWOOD ST. Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: Title: () Delete Title: (X) Change () Addition WILLIAMS, MALACHI HALL, WILLIE Name: Name: 820 CRESTWOOD ST. 820 CRESTWOOD ST. Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: JACKSONVILLE, FL 32208 Title: () Delete Title: () Change () Addition HALL, TAMMY Name: Name: Address: 820 CRESTWOOD ST. Address: JACKSONVILLE, FL 32208 City-St-Zip: 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: JANICE A WILLIAMS VPD 08/26/2009