

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001225

FILED
Apr 27, 2007
Secretary of State

Entity Name: RESTORATION MINISTRIES CENTER, INC

Current Principal Place of Business:

3220 N. HAVERHILL ROAD
B105
WEST PALM BEACH, FL 33417 US

New Principal Place of Business:

712 GAZETTA WAY
WEST PALM BEACH, FL 33413 US

Current Mailing Address:

3220 N. HAVERHILL ROAD
B105
WEST PALM BEACH, FL 33417 US

New Mailing Address:

712 GAZETTA WAY
WEST PALM BEACH, FL 33413 US

FEI Number: 02-0614174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, REGINALD K SR
3220 N. HAVERHILL ROAD
B105
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

DAVIS, REGINALD K SR
712 GAZETTA WAY
WEST PALM BEACH, FL 33413 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:

04/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WHITE, GLADYS
Address: 832 W. 5TH STREET
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VD () Delete
Name: EASLEY, JAMES B
Address: 2631 AVE R, CONDO B
City-St-Zip: RIVIERA BEACH, FL 33404

Title: SD () Delete
Name: BROWN, VIVIAN
Address: 1500 N CONGRESS AVE C-32
City-St-Zip: WEST PALM BEACH, FL 33401

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:

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: GLADYS WHITE

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date