2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2007
Secretary of State

DOCUMENT# N02000005944

Entity Name: ETERNAL LOVE MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

12751 WHITERAPIDS DRIVE
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

12751 WHITERAPIDS DRIVE
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 55-0789077 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARROYO, RAFAEL
12751 WHITERAPIDS DRIVE
ORLANDO, FL 32828 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:	D	( ) Delete
Name:	ARROYO, RAFAEL	
Address:	12751 WHITERAPIDS DRIVE	
City-St-Zip:	ORLANDO, FL 32828	
Title:	D	( ) Delete
Name:	ARROYO, CHERYL	
Address:	12751 WHITERAPIDS DRIVE	
City-St-Zip:	ORLANDO, FL 32828	
Title:	D	( ) Delete
Name:	BRUINSMA, GERARD	
Address:	848 FLYNN RD	
City-St-Zip:	ROCHESTER, NY 14612	
Title:	D	( ) Delete
Name:	BRUINSMA, SHIRLEY	
Address:	848 FLYNN RD	
City-St-Zip:	ROCHESTER, NY 14612	
Title:	D	(X) Delete
Name:	NARDELLA, ANTHONY M JR	
Address:	1110 DOUGLAS AVE STE 1002	
City-St-Zip:	ALTAMONTE SPRINGS, FL 32714	
Title:	D	(X) Delete
Name:	GUNSALLUS, FORREST	
Address:	1406 E. 9TH ST.	
City-St-Zip:	MT DORA, FL	

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:	
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: RAFAEL J ARROYO D 02/11/2007

Electronic Signature of Signing Officer or Director — Date