2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005947

FILED May 14, 2007 Secretary of State

Entity Name: LOLA BROKEMOND MINISTRIES-MADE IN HIS IMAGE, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

1440-13 DUNN AVE 12562 ANGEL LAKE DRIVE W JACKSONVILLE, FL 32219 JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

1440-13 DUNN AVE 12562 ANGEL LAKE DRIVE @ JACKSONVILLE, FL 32219 JACKSONVILLE, FL 32218

FEI Number: 54-2077910 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:

BROKEMOND, LOLA C

1440-13 DUNN AVE

JACKSONVILLE, FL 322184894 US

BROKEMOND, LOLA C

12562 ANGEL LAKE DRIVE W

JACKSONVILLE, FL 32218 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: 05/14/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BROKEMOND, LOLA C
 Name:
 BROKEMOND, LOLA C

 Address:
 1440 - 13 DUNN AVENUE
 Address:
 12562 ANGEL LAKE DRIVE W

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: TD () Delete Title: () Change () Addition

 Name:
 HARDAWAY, ROSE
 Name:

 Address:
 12562 ANGEL LAKE DR W
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 WILEY, YVONNE
 Name:

 Address:
 7027 QUEEN OF HEARTS
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32210
 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: LOLA C. BROKEMOND PD 05/14/2007