2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006198

Entity Name: SISTERS IN THE SPIRIT, INC.

FILED Apr 30, 2008 Secretary of State

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|---|--|---------------------------------|---|--|--------------------------------------|--|
| Current P | rincipal Place | e of Business: | New Prince | New Principal Place of Business: | | |
| 1585 W 34TH STREET RIVIERA BEACH, FL 33404 | | | | 1660 W 31 ST STREET RIVIERA BEACH, FL 33404 | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 1585 W 34TH STREET RIVIERA BEACH, FL 33404 | | | 1660 W 31ST STREET RIVIERA BEACH, FL 33404 | | | |
| FEI Number: 04-3709053 FEI Number Applied For () | | | FEI Number Not Applicable () Certificate of Status Desired () | | | |
| Name and | d Address of (| Current Registered Agent: | Name and | l Address of | New Registered Agent: | |
| 310 35 STI WEST PAI | LM BEACH, F | | ourpose of changing | its registered | office or registered agent, or both, | |
| SIGNATU | RE: | | | | | |
| | | nic Signature of Registered Age | ent | | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | D (ROLLE, STEPI 1585 W 34TH : RIVIERA BEAC | STREET | Title: Name: Address: City-St-Zip: | ROLLE, STEF 1660 W 31ST | | |
| Title: Name: Address: City-St-Zip: | D (LAZIER, E. BE 1660 WEST 31 RIVIERA BEAC | STREET | Title: Name: Address: City-St-Zip: | (|) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D (HAWKINS, LIN 16820 SW 109 MIAMI, FL 331 | AVE | Title: Name: Address: City-St-Zip: | (|) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | BOUIE, SABRI | DAKMONT DRIVE | Title: Name: Address: City-St-Zip: | (|) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | CAMERON, CO 221 NW 201 A | | Title: Name: Address: City-St-Zin: | (|)Change ()Addition | |

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: STEPHANIE D. ROLLE PRES 04/30/2008