

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006235

FILED
Jan 29, 2009
Secretary of State

Entity Name: OPEN DOOR SANCTUARY MINISTRY, INC.

Current Principal Place of Business:

13990 N.W. 27TH AVENUE
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

12224 NW 22 AVE
MIAMI, FL 33167

New Mailing Address:

FEI Number: 03-0479187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PENN, VERA
13990 N.W. 27TH AVENUE
OPA LOCKA, FL 33054 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: PD () Delete
Name: JONES, FREDERICK
Address: 8208 N.W. 201ST TERRACE
City-St-Zip: MIAMI LAKES, FL 33015

Title: VD () Delete
Name: PENN, LUWANDA
Address: 8208 N.W. 201ST TERRACE
City-St-Zip: MIAMI LAKES, FL 33015

Title: TD () Delete
Name: NELSON, NATARSHA
Address: 17901 N.W. 68TH AVE., APT. 205
City-St-Zip: MIAMI LAKES, FL 33015

Title: O () Delete
Name: CHAIN, RICHARD R
Address: 3267 N.W. 123 AVE
City-St-Zip: SUNRISE, FL 33323

Title: CBA () Delete
Name: AUSBORN, BRENDA
Address: 9706 NW 20TH AVE
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: PENN, LAWANDA
Address: 8208 N.W. 201ST TERRACE
City-St-Zip: MIAMI LAKES, FL 33015

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O (X) Change () Addition
Name: CAIN, RICHARD R
Address: 3267 N.W. 123 AVE
City-St-Zip: SUNRISE, FL 33323

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: FREDRICK JONES

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date