2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006502

FILED Apr 28, 2009 Secretary of State

Entity Name: KEEPING IT REAL HELP! MINISTRIES, INCORPORATED

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

2411 N 98TH 3935 ROSEWOOD WAY LAKELAND, FL 33809 ORLANDO, FL 32808

Current Mailing Address: New Mailing Address:

1919 NW 10TH ST 2025 LUDLOW LN 424 ORLANDO, FL 32839 LAKELAND, FL 33809

FEI Number: 56-2284281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 LLOYD, ERIC D

 1919 NW 10TH ST APT24
 2025 LUDLOW LN

 LAKELAND, FL 33809 US
 ORLANDO, FL 32839 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: 04/28/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: LLOYD, ERIC APOSTLE

Address: 1010 NW 10TH ST

 Address:
 1919 NW 10TH ST
 Address:
 2025 LUDLOW LN

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 ORLANDO, FL 32839

Title: D () Delete Title: () Change () Addition Name: LLOYD, DARRIK Name:

 Name:
 LLOYD, DARRIK
 Name:

 Address:
 105 LEELON RD
 Address:

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:

Title: SD () Delete Title: S (X) Change () Addition Name: SHARON, MASON Name: SHARON, MASON

 Name:
 SHARON, MASON
 Name:
 SHARON, MASON

 Address:
 1919 N 10TH ST
 Address:
 1919 N 10TH ST

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 LAKELAND, FL 33809

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

 Name:
 CAMPBELL, TERRANCE
 Name:
 LLOYD, TERRI

 Address:
 107 LEELON RD
 Address:
 2025 LUDLOW LN

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 ORLANDO, FL 32839

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: TERRI LLOYD D 04/28/2009