

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006736

FILED
Aug 26, 2009
Secretary of State

Entity Name: GOD'S RESURRECTION MINISTRY, INC.

Current Principal Place of Business:

6601 N W 22 AVE
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

6601 N W 22 AVE
MIAMI, FL 33147

New Mailing Address:

FEI Number: 55-0795306 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:

RAHMING, GUS L
3078 N.W. 60TH STREET
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

RAHMING, GUS L
1121 N W22 AVE
MIAMI, FL 33142 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: _____

08/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THOMAS, VICTOR DAVIS
Address: 2005 NW 93RD TER
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: RAHMING, ANGEL
Address: 3078 N.W. 60TH STREET
City-St-Zip: MIAMI, FL 33142

Title: P () Delete
Name: RAHMING, GUS
Address: 1121NW51 ST
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: WIMS, MARIE
Address: 1780 NW 5 AVE APT M
City-St-Zip: MIAMI, FL 33136

Title: D (X) Delete
Name: THOMAS, KAWANDA L
Address: 2005 NW 93RD TER
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: THOMAS, CRISSY
Address: 812NW110ST
City-St-Zip: MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GAY, SEZRA
Address: 1920 S E.50 ST.
City-St-Zip: GAINESVILLE, FL 32641

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 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: GUS L. RAHMING

P

08/26/2009

Electronic Signature of Signing Officer or Director

Date