2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N02000008376

Entity Name: THE FLAMING FIRE OF GOD MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

160 ALAMEDA AVE
FT MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

160 ALAMEDA AVE
FT MYERS, FL 33905

New Mailing Address:

FEI Number: 47-0884687 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KANELL, THOMAS P
160 ALAMEDA AVE
FT MYERS, FL 33905 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:	P	( ) Delete
Name:	LUBANSA, BILLY A.D.M. REV.DR.	
Address:	160 ALAMEDA AVENUE	
City-St-Zip:	FT MYERS, FL 33905	
Title:	D	( ) Delete
Name:	PENA, NARCISO C EVANGEL	
Address:	433 S W 20 PL	
City-St-Zip:	CAPE CORAL, FL 33914	
Title:	D	( ) Delete
Name:	KANELL, THOMAS P BROTHER	
Address:	160 ALAMEDA AVE	
City-St-Zip:	FT MYERS, FL 33905	
Title:	D	( ) Delete
Name:	BATE, AFRED BROTHER	
Address:	111 CARAWAY RD	
City-St-Zip:	REISTERSTOWN, MD 21136	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BILLY LUBANSA P 04/30/2009

Electronic Signature of Signing Officer or Director — Date