2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2009
Secretary of State

DOCUMENT# N03000003148

Entity Name: THE BELIEVER'S SCHOOL OF LEARNING, INC.

Current Principal Place of Business:

1170 NE 219 ST
LAWTEY, FL 32058

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 177
LAWTEY, FL 32058

New Mailing Address:

FEI Number: 30-0202907 **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:

CLARK, RELLEN H
1170 NE 219 ST
LAWTEY, FL 32058 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: D ( ) Delete
Name: HOUSTON, WILLIE N
Address: 22725 LINWOOD AVE
City-St-Zip: LAWTEY, FL 32058

Title: D ( ) Delete
Name: FELTON, WILLIE
Address: P.O. BOX 133
City-St-Zip: LAWTEY, FL 32058

Title: D ( ) Delete
Name: BLYE, TOREAN G
Address: P.O. BOX 177
City-St-Zip: LAWTEY, FL 32058

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HOUSTON, WILLIE N
Address: 22725 LINWOOD AVE
City-St-Zip: LAWTEY, FL 32058 US

Title: D (X) Change ( ) Addition
Name: FELTON, WILLIE
Address: P.O. BOX 133
City-St-Zip: LAWTEY, FL 32058 US

Title: D (X) Change ( ) Addition
Name: BLYE, TOREAN G
Address: P.O. BOX 177
City-St-Zip: LAWTEY, FL 32058 US

Title: O ( ) Change (X) Addition
Name: CLARK, RELLEN
Address: 1170 NE 219TH ST
City-St-Zip: LAWTEY, FL 32058 US

Title: O ( ) Change (X) Addition
Name: CLARK, YOLANDA
Address: P. O. BOX 211
City-St-Zip: LAWTEY, FL 32058 US

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: RELLEN H. CLARK O 09/01/2009
Electronic Signature of Signing Officer or Director — Date