2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005520

FILED Feb 06, 2009 Secretary of State

Entity Name: CAROLYN ELLIS EVANGELISTIC MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 163 S.W. FOURTH STREET DEERFIELD BEACH, FL 33441 **Current Mailing Address: New Mailing Address:** 163 S.W. FOURTH STREET DEERFIELD BEACH, FL 33441 FEI Number: 65-1194640 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: RODRIQUEZ, MR. CLIFTON H CPA 3146 N.W. 68 STREET FT. LAUDERDALE, FL 333091206 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ELLIS, CAROLYN MINISTE Name: Name: 163 S.W. FOURTH STREET Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: Title: VPTD () Delete Title: () Change () Addition ELLIS, KHADIJA Name: Name: Address: 163 S.W. FOURTH STREET Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: Title: () Delete Title: () Change () Addition RODRIQUEZ, CLIFTON H Name: Name: Address: 3146 N.W. 68 STREET Address: City-St-Zip: FT. LAUDERDALE, FL 33309 City-St-Zip: Title: DT Title: () Change () Addition () Delete Name: SCOTT, LINDA Name: 5658 22ND STREET, APT 2006 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33712 City-St-Zip: Title: () Delete Title: () Change () Addition MILLER, PATRICIA Name: Name: 1438 VICTORIA BLVD Address: Address: City-St-Zip: ROCKLEDGE, FL 33925 City-St-Zip: Title: () Delete Title: () Change () Addition ELLIS-SINGLETARY, KARRAH Name: Name: Address: 64 DIVISION STREET Address: DAYTONA BEACH, FL 32114 City-St-Zip: 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: CAROLYN L. ELLIS CD 02/06/2009