2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008022

FILED Apr 28, 2007 Secretary of State

Entity Name: ELEEO HOUSE FAMILY MINISTRIES, INC.

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

2259 PICCADILLY CIRCUS NAPLES, FL 34112

Current Mailing Address: New Mailing Address:

2259 PICCADILLY CIRCUS NAPLES, FL 34112

FEI Number: 20-0229243 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:

D'AMICO-WHITE, LUCY A
2259 PICCADILLY CIRCUS
NAPLES, FL 34112 US

D'AMICO, LUCY A
2259 PICCADILLY CIRCUS
NAPLES, FL 34112 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: LUCY D'AMICO 04/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 D'AMICO-WHITE, LUCY A
 Name:
 D'AMICO, LUCY A

 Address:
 2259 PICADILLY CIRCUS
 Address:
 2259 PICADILLY CIRCUS

 City-St-Zip:
 NAPLES, FL 33412
 NAPLES, FL 33412

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

 Name:
 WHITE, GREGORY S
 Name:

 Address:
 2259 PICADILLY CIRCUS
 Address:

 City-St-Zip:
 NAPLES, FL 34112
 City-St-Zip:

Title: SEC () Delete Title: () Change () Addition

 Name:
 D'AMICO, LINDY M
 Name:

 Address:
 6099 SHALLOWS WAY
 Address:

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:

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

 Name:
 RICE, LINDA
 Name:

 Address:
 6099 SHALLOWS WAY
 Address:

 City-St-Zip:
 NAPLES, FL 34109
 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: LUCY D'AMICO PRES 04/28/2007