2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# N03000008460

Entity Name: THE ABRAHAMIC FAITH BEACON PUBLISHING SOCIETY, INC.

Current Principal Place of Business:

10335 SW 35TH STREET
MIAMI, FL 331653811

New Principal Place of Business:

Current Mailing Address:

10335 SW 35TH STREET
MIAMI, FL 331653811

New Mailing Address:

FEI Number: 55-0850231 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, FRANKLYNE H
10335 SW 35TH STREET
MIAMI, FL 331653811 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:	CD	( ) Delete
Name:	ROSS, FRANKLYNE H	
Address:	10335 SW 35TH STREET	
City-St-Zip:	MIAMI, FL 331653811	
Title:	VD	( ) Delete
Name:	DRABENSTOTT, HERMAN	
Address:	8000 N.W. WAUKOMIS DR	
City-St-Zip:	KANSAS CITY, MO 64151	
Title:	STD	( ) Delete
Name:	ROSS, WILSON P	
Address:	18403 SW 88 PLACE	
City-St-Zip:	MIAMI, FL 331577160	
Title:	D	( ) Delete
Name:	CARPENTER, MARVIN	
Address:	261 HUGHES LANE	
City-St-Zip:	DANVILLE, KY 404229288	
Title:	D	( ) Delete
Name:	FAZIO, NICK	
Address:	201 SOUTH CHESTNUT ST	
City-St-Zip:	JEFFERSON, OH 440471314	
Title:	D	( ) Delete
Name:	SPOONAMORE, DAVID	
Address:	250 HALFLICH ST	
City-St-Zip:	MARKLE, IN 46770	

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:	
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: WILSON ROSS STD 02/18/2009

Electronic Signature of Signing Officer or Director — Date