2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008
Secretary of State

DOCUMENT# N03000009625

Entity Name: POWER FOR LIVING MINISTRY OF U.S.A. INC.

Current Principal Place of Business:

22880 SR 247
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

22880 SR 247
LAKE CITY, FL 32024

New Mailing Address:

FEI Number: 65-0770206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHILDS, RONALD
22880 SR 247
LAKE CITY, FL 32024 US

Name and Address of New Registered Agent:

CHILDS, RONALD D SR
22880 SR 247
LAKE CITY, FL 32024 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: RN CHILDS SR 02/01/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CHILDS, RON SR.
Address: 22880 SR 247
City-St-Zip: LAKE CITY, FL 32024 SU

Title: VP ( ) Delete
Name: HATCHER, GARY C REV
Address: MANATEE SPRINGS RD
City-St-Zip: CHIEFLAND, FL 32644 LV

Title: S ( ) Delete
Name: CHILDS, GENEVA
Address: 22880 SR 247
City-St-Zip: LAKE CITY, FL 32024 SU

Title: T ( ) Delete
Name: ADAMS, JENNIFER
Address: 206 NW CARTER STREET
City-St-Zip: BRANFORD, FL 32008

Title: PRBY ( ) Delete
Name: ALAN, ADAMS PRESBYT
Address: 206 NW CARTER STREET
City-St-Zip: BRANFORD, FL 32008 SU

Title: B&F ( ) Delete
Name: HOWARD, RAYMOND DIERCTO
Address: CR 49
City-St-Zip: OBRIEN, FL 32071 SU

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: RON CHILDS SR PRES 02/01/2008
Electronic Signature of Signing Officer or Director Date