

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010653

FILED
May 01, 2009
Secretary of State

Entity Name: UNITED POWERHOUSE MINISTRIES INCORPORATED

Current Principal Place of Business:

1056 COLEMAN ST
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560535
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

BOYKINS, BRENDA L
1056 COLEMAN ST
MELBOURNE, FL 32935 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: BOYKINS, BRENDA L
Address: 1056 COLEMAN ST
City-St-Zip: MELBOURNE, FL 32935

Title: S () Delete
Name: BOYKINS, LAWANDA M
Address: 1056 COLEMAN STREET
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: JAMES, APOSTLE KING
Address: PO BOX 560535
City-St-Zip: ROCKLEDGE, FL 32955

Title: S () Delete
Name: JEFFERSON, PASTOR ANNIE
Address: P O BOX 3047
City-St-Zip: JACKSON, MS 39207

Title: VP () Delete
Name: SIMPSON, BISHOP ROBERT
Address: 337 SOUTH TROPICAL TRL
City-St-Zip: MERRITT ISLAND, FL 32952

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:

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: BRENDA BOYKINS

D

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date