2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000043

FILED Mar 09, 2011 Secretary of State

Entity Name: ALTARED LIVES MINISTRIES, INC.

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

1079 FOUNTAIN LAKE DRIVE 4355 CORPORATE AVE., APT. 111 BRUNSWICK, GA 31525 US LAKELAND, FL 33809 US

Current Mailing Address: New Mailing Address:

P. O. BOX 21289 P. O. BOX 91475

ST. SIMONS ISLAND, GA 31522 US LAKELAND, FL 33804 US

FEI Number: 54-2143778 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:

USA-RA LLC

MCCORMICK, DONNA L

841 PRUDENTIAL DRIVE, 12TH FLOOR

4355 CORPORATE AVE., APT. 111

JACKSONVILLE, FL 32207 US 4355 CORPORATE AVE., APT. 11

LAKELAND, FL 33809 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: DONNA L. MCCORMICK 03/09/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PRES

Name: MCCORMICK, DONNA L

Address: 4355 CORPORATE AVE., APT. 111

City-St-Zip: LAKELAND, FL 33809 US

Title: VP

Name: SMITH, BEVERLY M Address: 5959 CURRY FORD RD #275

City-St-Zip: ORLANDO, FL 32823 US

Title: TREA

Name: GREEN, REDGE Address: P. O. BOX 327

City-St-Zip: UNION CITY, GA 30291 US

I hereby 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 all other like empowered.

SIGNATURE: DONNA L. MCCORMICK PRES 03/09/2011