

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000856

FILED
Mar 08, 2009
Secretary of State

Entity Name: REGENESIS MINISTRIES, INC.

Current Principal Place of Business:

3956 TOWN CENTER BLVD
PMB526
ORLANDO, FL 32837 US

New Principal Place of Business:

Current Mailing Address:

3956 TOWN CENTER BLVD
PMB526
ORLANDO, FL 32837 US

New Mailing Address:

FEI Number: 11-3712829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALERIAIY, LISA
8 EDINBURGH DRIVE
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

CARTER, KENNETH B
3158 CRESTED CIRCLE
ORLANDO, FL 32837 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: KENNETH B CARTER

03/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHPD () Delete
Name: CARTER, KEN
Address: 3158 CRESTED CIRCLE
City-St-Zip: ORLANDO, FL 32837

Title: VCHD () Delete
Name: MARTIN, GARY
Address: 3609 OCITA DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: TD () Delete
Name: BARNES, THOMAS G
Address: 2902 EAGLE LAKE DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: SD () Delete
Name: VALERIAIY, LISA
Address: 8 EDINBURGH DRIVE
City-St-Zip: HAINES CITY, FL 33844

Title: EXD () Delete
Name: MAYNARD, PHILIP DR.
Address: 401 NORTH LAKESIDE DRIVE
City-St-Zip: SATILLITE BEACH, FL 32937

Title: D () Delete
Name: LONG, JOHN DR.
Address: 137 RIO COURT
City-St-Zip: DAVENPORT, FL 33896

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHPD (X) Change () Addition
Name: CARTER, KENNETH B
Address: 3158 CRESTED CIRCLE
City-St-Zip: ORLANDO, FL 32837

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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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: KENNETH B CARTER

CHPD

03/08/2009

Electronic Signature of Signing Officer or Director

Date