

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001068

FILED
May 27, 2009
Secretary of State

Entity Name: IDELETTE REMY MINISTRIES, INC.

Current Principal Place of Business:

3708 N.W. 107 TERRACE
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

3708 N.W. 107 TERRACE
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 32-0058261 FEI Number Applied For () FEI Number Not Applicable () 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:

Name and Address of New Registered Agent:

REMY, IDELETTE
3708 N.W. 107 TERRACE
SUNRISE, FL 33351 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REMY, IDELETTE
Address: 3708 N.W. 107 TERRACE
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: REMY, MICHELLE
Address: 3708 NW 107TH TERRACE
City-St-Zip: SUNRISE, FL 33351

Title: O () Delete
Name: HEATH, CAROL OFF
Address: 8592 W. SUNRISE
City-St-Zip: PLANTATION, FL 33322 US

Title: D () Delete
Name: PIERRE, DAVID DIR
Address: 3251 FAIRFIELD DR.
City-St-Zip: KISSIMMEE, FL 34743 US

Title: O () Delete
Name: TANDO, DEDY OF
Address: 15421 BANDON DR.
City-St-Zip: AUSTIN, TX 78717

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: IDELETTE REMY

P

05/27/2009

Electronic Signature of Signing Officer or Director

Date