2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007798

Title:

Name:

Address:

City-St-Zip:

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2080 SHERMAN CIRCLE N., APT. #207

BANK, MICHAEL

MIRAMAR, FL 33025

FILED Apr 14, 2008 Secretary of State

Entity Name: THE RAPTURE MINISTRY, INC. **Current Principal Place of Business: New Principal Place of Business:** 4204 S.W. 24TH STREET HOLLYWOOD, FL 33023 **Current Mailing Address: New Mailing Address:** 4204 S.W. 24TH STREET HOLLYWOOD, FL 33023 FEI Number: 61-1494598 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: HAMMOCK, CORNELIA PASTOR 4204 S.W. 24TH STREET HOLLYWOOD, FL 33023 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PVD () Change () Addition () Delete HAMMOCK, CORNELIA Name: Name: Address: 4204 S.W. 24TH STREET Address: City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WILSON, MARY Name: Address: 2010 SW 57TH AVENUE Address: City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: Title: () Delete Title: () Change () Addition DAVIS, BONNIE Name: Name: 3051 NW 17TH PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CORNELIA HAMMOCK **PVD** 04/14/2008

() Change () Addition