2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009421

Entity Name: RAAH FINANCIAL MINISTRIES, INC.

FILED Feb 19, 2009 Secretary of State

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

8017 THOROUGHBRED RD. PENSACOLA, FL 325263230

Current Mailing Address: New Mailing Address:

8017 THOROUGHBRED RD. PENSACOLA, FL 325263230

FEI Number: 26-0095616 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:

JONES, RON B
2446 TRAILWOOD DRIVE
CANTONMENT, FL 325336719 US

JONES, RON B REV.
8017 THOROUGHBRED ROAD
PENSACOLA, FL 32526 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: REV.RON B. JONES 02/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

GASTONIA, NC 28056

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 JONES, RON B
 Name:
 JONES, RON B REV.

 Address:
 2446 TRAILWOOD DRIVE
 Address:
 8017 THOROUGHBRED ROAD

 City-St-Zip:
 CANTONMENT, FL 325336719
 City-St-Zip:
 PENSACOLA, FL 32526

Title: SD () Delete Title: SD (X) Change () Addition Name: JONES, ANGIE J Name: JONES, ANGIE J

Address: 2446 TRAILWOOD DRIVE Address: 8017 THOROUGHBRED ROAD City-St-Zip: CANTONMENT, FL 325336719 City-St-Zip: PENSACOLA, FL 32526

Title: () Delete Title: (X) Change () Addition WORRELL, RANDY K WORRELL, RANDY K REV. Name: Name: Address: 4447 WEEMS ROAD Address: 4447 WEEMS ROAD City-St-Zip: COLUMBUS, GA 31909 City-St-Zip: COLUMBUS, GA 31909

Title: VD () Delete Title: VD (X) Change () Addition Name: LOWE, JERRY W Name: LOWE, JERRY W Address: 1842 WHITE CEDAR DRIVE Address: 123 DEER CROSSING TRAIL

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.

City-St-Zip:

GASTONIA, NC 28056

SIGNATURE: REV. RON B. JONES PD 02/19/2009