

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009916

FILED
Jul 26, 2008
Secretary of State

Entity Name: BROTHER'S KEEPER INTERNATIONAL MINISTRIES INC

Current Principal Place of Business:

9264 MARICAMP ROAD
#9
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 830304
OCALA, FL 34483

New Mailing Address:

FEI Number: 52-2450982 **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:

SATCHELL, BRUCE E SR.
6 FIR DRIVE TRACE
OCALA, FL 34472 US

Name and Address of New Registered Agent:

SATCHELL, BRUCE E SR.
3001 SE LAKE WEIR AVE
APT # 1105
OCALA, FL 34472 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: BRUCE SATCHELL SR

07/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SP () Delete
Name: SATCHELL, BRUCE E SR.
Address: 6 FIR DRIVE TRACE
City-St-Zip: OCALA, FL 34472

Title: CP () Delete
Name: SATCHELL, BETH R
Address: 6 FIR DRIVE TRACE
City-St-Zip: OCALA, FL 34472

Title: AP () Delete
Name: QUETANT, JEANPHIPPE
Address: 3367 SW 147TH STREET
City-St-Zip: OCALA, FL 34473

Title: S (X) Delete
Name: ERNA, PLANCHER-QUETA
Address: 3367 SW 147TH STREET
City-St-Zip: OCALA, FL 34473

Title: SEC () Delete
Name: RAMSDEN, BARBARA
Address: 6 FIR DRIVE TRACE
City-St-Zip: OCALA, FL 34472

Title: M () Delete
Name: DALE, DIANA
Address: 6 FIR DRIVE TRACE
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SP (X) Change () Addition
Name: SATCHELL, BRUCE E SR.
Address: 3001 SE LAKE WEIR AVE APT #1105
City-St-Zip: OCALA, FL 34472

Title: CP (X) Change () Addition
Name: SATCHELL, BETH R
Address: 3001 SE LAKE WEIR AVEAPT # 1105
City-St-Zip: OCALA, FL 34472

Title: SS (X) Change () Addition
Name: WANTON, SHARION
Address: 6FFIR DRIVE TRACE
City-St-Zip: OCALA, FL 34472

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: BRUCE SATCHELL SR

SP

07/26/2008

Electronic Signature of Signing Officer or Director

Date