2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# N04738

Entity Name: FRANK BURRELLI EVANGELISTIC ASSOCIATION MINISTRIES, INC.

Current Principal Place of Business:

C/O DR. FRANK R. BURRELLI
830 SANTA BARBARA BLVD.
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

C/O DR. FRANK R. BURRELLI
830 SANTA BARBARA BLVD.
CAPE CORAL, FL 33991

New Mailing Address:

FEI Number: 59-2450167 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BURRELLI, FRANK DR.
830 SANTA BARBARA BLVD.
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

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:	PD	( ) Delete
Name:	BURRELLI, FRANK R	
Address:	830 SANTA BARBARA BLVD.	
City-St-Zip:	CAPE CORAL, FL 33991	
Title:	V	( ) Delete
Name:	BURRELLI, CAROL	
Address:	830 SANTA BARBARA BLVD	
City-St-Zip:	CAPE CORAL, FL 33991	
Title:	ST	( ) Delete
Name:	BURRELLI, CAROL	
Address:	830 SANTA BARBARA BLVD.	
City-St-Zip:	CAPE CORAL, FL 33991	
Title:	D	( ) Delete
Name:	BROWN, THOMAS	
Address:	27031 PINE AVE.	
City-St-Zip:	BONITA SPRINGS, FL	
Title:	D	( ) Delete
Name:	WILLIAMSON, SCOTT	
Address:	210 WHIPPERWILL TRAIL	
City-St-Zip:	FRANKLIN, NC 28734	
Title:	D	( ) Delete
Name:	GOINS, DAVID	
Address:	1524 SE 41ST ST.	
City-St-Zip:	CAPE CORAL, FL	

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:		
Title:	D	(X) Change ( ) Addition
Name:	GOINS, DAVID	
Address:	1524 SE 41ST ST.	
City-St-Zip:	CAPE CORAL, FL 33992	

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: DR. FRANK R. BURRELLI PD 02/18/2009
Electronic Signature of Signing Officer or Director — Date