2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000809

FILED Apr 30, 2008 Secretary of State

Entity Name: REDEMPTION APOSTOLIC INTERNATIONAL NETWORK, INC.

Current Pr	rincipal Place of Business:	New Principal Place of Business:		
	NGER WALK JLM BEACH, FL 33414			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
	ENGER WALK JLM BEACH, FL 33414	178 BERENGER WALK ROYAL PALM BEACH, FL 33414		
FEI Number:	62-1425557 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Sta	atus Desired (X)	
Name and	Address of Current Registered Agent:	Name and Address of New Registered	Agent:	
WEST PAL	NGER WALK LM BEACH, FL 33414 US named entity submits this statement for the pure	pose of changing its registered office or registere	ed agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent	Date		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () Delete THOMAS, RICHARD BISHOP 178 BERENGER WALK ROYAL PALM BEACH, FL 33414	Title: () Change () Addition Name: Address: City-St-Zip:	on	
Title: Name: Address: City-St-Zip:	DIR () Delete MINEW, MATTHEW DEACON 178 BERENGER WALK ROYAL PALM BEACH, FL 33414	Title: () Change () Addition Name: Address: City-St-Zip:	non	
Title: Name: Address: City-St-Zip:	DIR () Delete THOMAS, CYNTHIA ELDER 178 BERENGER WALK ROYAL PALM BEACH, FL 33414	Title: () Change () Addition Name: Address: City-St-Zip:	non	
Title: Name: Address: City-St-Zip:	HAIT (X) Delete LA ROSE, SANDY DEACON 178 BERENGER WALK ROYAL PALM BEACH, FL 33414	Title: () Change () Addition Name: Address: City-St-Zip:	on	
Title: Name: Address: City-St-Zip:	HAIT () Delete LOUISIUS, MANNES ELDER 178 BERENGER WALK ROYAL PALM BEACH, FL 33414	Title: HAIT (X) Change () Additi Name: LOUISIUS, MANES BISHOP Address: 178 BERENGER WALK City-St-Zip: ROYAL PALM BEACH, FL 33414	on	
Title: Name: Address: City-St-Zip:	HAIT (X) Delete SEIDE, WILFRENTZ ELDER 178 BERNEGER WALK ROYAL PALM BEACH, FL 33414	Title: () Change () Addition Name: Address: City-St-Zip:	on	

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: RICHARDTHOMAS PRES 04/30/2008