

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000953

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** ABOVE ALL MINSTRY, INC.

**Current Principal Place of Business:**

1559 DOLGNER PLACE  
SANFORD, FL 32771 US

**New Principal Place of Business:**

1419 ASHDOWN CT.  
SANFORD, FL 32771 US

**Current Mailing Address:**

1559 DOLGNER PLACE  
SANFORD, FL 32771 US

**New Mailing Address:**

1419 ASHDOWN CT.  
SANFORD, FL 32771 US

**FEI Number:** 20-2245948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOFZIGER, ARLYNN  
1559 DOLGNER PLACE  
SANFORD, FL 32771 US

**Name and Address of New Registered Agent:**

SOLOMON, PAUL  
1419 ASHDOWN CT.  
SANFORD, FL 32771 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: PAUL SOLOMON

01/08/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: NOFZIGER, ARLYNN  
Address: 1140 S. ORLANDO AVE. K18  
City-St-Zip: MAITLAND, FL 32751 US

Title: VS  
Name: SOLOMON, PAUL  
Address: 1419 ASHDOWN COURT  
City-St-Zip: SANFORD, FL 32771

I hereby 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 all other like empowered.

SIGNATURE: PAUL SOLOMON

VP

01/08/2010

Electronic Signature of Signing Officer or Director

Date