

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002540

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ASSEMBLY OF THE FIRSTBORN MINISTRIES, INC.

## Current Principal Place of Business:

17241 N.W. 9TH PLACE  
MIAMI, FL 33169

## New Principal Place of Business:

3800 FOWLER STREET  
UNIT 9  
FORT MYERS, FL 33901

## Current Mailing Address:

17241 N.W. 9TH PLACE  
MIAMI, FL 33169

## New Mailing Address:

FEI Number: 20-2525413      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 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: GASPARD, MAXON PASTOR  
Address: 17241 N.W. 9TH PLACE  
City-St-Zip: MIAMI, FL 33169 DA

Title: VD ( ) Delete  
Name: BON-AMI, HERARD PASTOR  
Address: 1141 S.W. 2ND STREET  
City-St-Zip: CAPE CORAL, FL 33991 LE

Title: TD ( ) Delete  
Name: ODRIGE, GARAT  
Address: 220N W29STREET  
City-St-Zip: CAPE CORAL, FL 33993 LE

Title: D ( ) Delete  
Name: PERIODE, AULEAN  
Address: 3312 BROADWAY STREET  
City-St-Zip: FORT MYERS, FL 33901 LE

Title: SE-D ( ) Delete  
Name: STGERMAIN, CATY  
Address: 1944 SUNSET PL UNIT 2  
City-St-Zip: FORT MYERS, FL 33901 LE

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD/O (X) Change ( ) Addition  
Name: REV. DR. GASPARD, MAXON, APOSTLE BISHOP  
Address: 3593 SW 68 WAY  
City-St-Zip: MIRAMAR, FL 33023 BR

Title: VP/D (X) Change ( ) Addition  
Name: BON-AMI, HERARD PASTOR  
Address: 1141 S.W. 2ND STREET  
City-St-Zip: CAPE CORAL, FL 33991 LE

Title: AC/D (X) Change ( ) Addition  
Name: ODRIGE, GARAT ACCOUNT  
Address: 220N W29STREET  
City-St-Zip: CAPE CORAL, FL 33993 LE

Title: TR/D (X) Change ( ) Addition  
Name: PERIODE, AULEAN TR/D  
Address: 3312 BROADWAY STREET  
City-St-Zip: FORT MYERS, FL 33901 LE

Title: SEC. (X) Change ( ) Addition  
Name: ST.GERMAIN, CATY SECR/D  
Address: 1944 SUNSET PL UNIT 2  
City-St-Zip: FORT MYERS, FL 33901 LE

Title: C/D ( ) Change (X) Addition  
Name: REV. YVES, DESCOLLINES PASTOR  
Address: 3712 12TH STREET W  
City-St-Zip: LEHIGHT ACRES, FL 33971 LE

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: REV. DR. GASPARD MAXON, PENTECOSTAL, BISHOP

PD/O

04/30/2009

Electronic Signature of Signing Officer or Director

Date