

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003474

FILED  
Feb 07, 2007  
Secretary of State

**Entity Name:** EDUCATION IN CHRIST MINISTRY, INC.

**Current Principal Place of Business:**

12401 STIRLING ROAD  
COOPER CITY, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

12401 STIRLING ROAD  
COOPER CITY, FL 33330

**New Mailing Address:**

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

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

DE LA MORA, ARTURO  
12401 STIRLING ROAD  
COOPER CITY, FL 33330    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: DP                      ( ) Delete  
Name: DE LA MORA, ARTURO REV  
Address: 12401 STIRLING ROAD  
City-St-Zip: COOPER CITY, FL 33330 US

Title: DT                      ( ) Delete  
Name: DE LA MORA, DORA  
Address: 12401 STIRLING ROAD  
City-St-Zip: COOPER CITY, FL 33330 US

Title: DS                      (X) Delete  
Name: MOELLER, WILLY H DR.  
Address: 2508 MONTCLAIRE CIRCLE  
City-St-Zip: WESTON, FL 33327 US

Title: T                      (X) Delete  
Name: MOELLER, EVELYN M  
Address: 2508 MONTCLAIRE CIRCLE  
City-St-Zip: WESTON, FL 33330 US

Title: T                      (X) Delete  
Name: MUJICA, HECTOR R REV  
Address: 933 SABANA FALLS  
City-St-Zip: WESTON, FL 33327 US

Title: T                      (X) Delete  
Name: MUJICA, NARKIS L  
Address: 933 SABANA FALLS  
City-St-Zip: WESTON, FL 33327 US

**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:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ARTURO DE LA MORA

DP

02/07/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date