

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003961

FILED
Feb 15, 2009
Secretary of State

Entity Name: DIVINE GRACE & MERCY INTERNATIONAL MINISTRIES, INC

Current Principal Place of Business:

8033 BISCAYNE BLVD.
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 380535
MIAMI, FL 33238

New Mailing Address:

FEI Number: 20-2672663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, LARRY G P
170 NW 92ND STREET
MIAMI, FL 33150 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: ANDERSON, LARRY G
Address: 170 NW 92ND STREET
City-St-Zip: MIAMI SHORES, FL 33150

Title: VD () Delete
Name: MOORE, XAVIER
Address: 170 NW 92ND STREET
City-St-Zip: MIAMI SHORES, FL 33150

Title: SD () Delete
Name: CUNNINGHAM, BEVERLY
Address: 170 NW 92ND STREET
City-St-Zip: MIAMI SHORES, FL 33150

Title: D () Delete
Name: PIERRE, FRED
Address: 7601 NE MIAMI CT.
City-St-Zip: MIAMI, FL 33180

Title: D () Delete
Name: RITTER-TAYLOR, SHANRIKA
Address: 15820 NW 39TH COURT
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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 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: LARRY G. ANDERSON

PD

02/15/2009

Electronic Signature of Signing Officer or Director

Date