2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2009
Secretary of State

DOCUMENT# N05000006146

Entity Name: LIVING JAMES 1:27 FOUNDATION, INC.

Current Principal Place of Business:

19151 SW 54TH PLACE
SOUTHWEST RANCHES, FL 33332

New Principal Place of Business:

Current Mailing Address:

19151 SW 54TH PLACE
SOUTHWEST RANCHES, FL 33332

New Mailing Address:

FEI Number: 87-0747900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAHS, DOUGLAS A
2763 OAKBROOK DRIVE
WESTON, FL 33332 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: D ( ) Delete
Name: JACKSON, KIMBERLY R
Address: 19151 SW 54TH PLACE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D ( ) Delete
Name: JACKSON, EDWARD P
Address: 19151 SW 54TH PLACE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D ( ) Delete
Name: SAHS, DEBORAH M
Address: 2763 OAKBROOK DRIVE
City-St-Zip: WESTON, FL 33332

Title: D ( ) Delete
Name: SAHS, DOUGLAS A
Address: 2763 OAKBROOK DRIVE
City-St-Zip: WESTON, FL 33332

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

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

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: D ( ) Change (X) Addition
Name: BRASINGTON, IRENE P
Address: 431 NW 131 AVE.
City-St-Zip: PLANTATION, FL 33325

Title: D ( ) Change (X) Addition
Name: SAWYER, KATHLEEN
Address: 15600 GAUNTLET HALL MANOR
City-St-Zip: DAVIE, FL 33331

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: DOUGLAS A SAHS D 04/04/2009
Electronic Signature of Signing Officer or Director — Date