

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006359

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: LAST MINUTE MINISTRIES, INC

## Current Principal Place of Business:

8647 CRATER TERR  
LAKE PARK, FL 33403 US

## New Principal Place of Business:

## Current Mailing Address:

8647 CRATER TERR  
LAKE PARK, FL 33403 US

## New Mailing Address:

FEI Number: 20-2932877

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANTZ, ANNIE REV  
8647 CRATER TERR  
LAKE PARK, FL 33403 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: PRES ( ) Delete  
Name: MANTZ, ANNIE REV  
Address: 8647 CRATER TERR  
City-St-Zip: LAKE PARK, FL 33403 US

Title: VP ( ) Delete  
Name: MANTZ, G W MUSIC P  
Address: 8647 CRATER TERR  
City-St-Zip: LAKE PARK, FL 33403 US

Title: TREA ( ) Delete  
Name: FORTNEY, ALICIA A  
Address: 8647 CRATER TERR  
City-St-Zip: LAKE PARK, FL 33403 US

Title: E ( ) Delete  
Name: ZENTKOVICH, DIANA  
Address: 3531 PINE NEEDLE DR. APT C-1  
City-St-Zip: GREENACRES CITY, FL 33463

Title: E (X) Delete  
Name: CI FUENTES, CLARA PASTOR  
Address: 9153 ROAN LANE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

## 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:

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. ANNIE MANTZ

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date