

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007349

FILED
Aug 22, 2008
Secretary of State

Entity Name: JEREMIAH 29:11 OF FLORIDA, INC.

Current Principal Place of Business:

29605 US HWY 19 N - STE 260
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

29605 US HWY 19 N - STE 260
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 20-2747380 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LINDBERG, SALLY
29605 US HWY 19 N - STE 260
CLEARWATER, FL 33761 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: LINDBERG, SALLY
Address: 29605 US HWY 19 N - STE 260
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: FLYNT, HAZMIN
Address: 29605 US HWY 19 N - STE 260
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: MASTERS, PATRICIA
Address: 29605 US HWY 19 N - STE 260
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SITMER, ROBYN A
Address: 29605 US HWY 19 N - STE 260
City-St-Zip: CLEARWATER, FL 33761

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: ROBYN SITMER

PRES

08/22/2008

Electronic Signature of Signing Officer or Director

Date