

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009857

FILED
Feb 24, 2009
Secretary of State

Entity Name: MELBOURNE RIVER OF LIFE FELLOWSHIP, INC.

Current Principal Place of Business:

1932 TREVINO CIRCLE
MELBOURNE, FL 32935

New Principal Place of Business:

2742 AURORA ROAD
MELBOURNE, FL 32935

Current Mailing Address:

1932 TREVINO CIRCLE
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 20-3474671 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KINGSLEY, JOANNE E
1932 TREVINO CIRCLE
MELBOURNE, FL 32935 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: P () Delete
Name: KINGSLEY, WILLIAM A
Address: 1932 TREVINO CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: D (X) Delete
Name: SHERMAN, JEFFREY
Address: 2231 HAMPTON GREENS
City-St-Zip: MELBOURNE, FL 32935

Title: VP () Delete
Name: KINGSLEY, JOANNE E
Address: 1932 TREVINO CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: D (X) Delete
Name: SHERMAN, SHERYL
Address: 2231 HAMPTON GREENS
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: KENNEDY, SALLY
Address: 7 CLARK STREET
City-St-Zip: SOUTH GLENS FALLS, NY 12803

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: WILLIAM A KINGSLEY

PRES

02/24/2009

Electronic Signature of Signing Officer or Director

Date