

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010680

FILED
Apr 03, 2009
Secretary of State

Entity Name: SONGEVANGEL INC.

Current Principal Place of Business:

8028 MEADOWLARK LN.
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

8028 MEADOWLARK LN.
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWSHAW, IAN
8028 MEADOWLARK LN.
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

CRAWSHAW, IAN REV.
8028 MEADOWLARK LN.
PORT ST. LUCIE, FL 34952 US

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: IAN CRAWSHAW

04/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CRAWSHAW, IAN REV.
Address: 8028 MEADOWLARK LN.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: D () Delete
Name: TEEN, ROD MR.
Address: 25811 EDINBOROUGH
City-St-Zip: PERRYSBURG, OH 43551

Title: D () Delete
Name: SHIFFER, BROCK REV.
Address: 2475 SE 4TH PLACE
City-St-Zip: HOMESTEAD, FL 33033

Title: D () Delete
Name: SILCOX, PAUL DR
Address: 31 GLENDALE AVE.
City-St-Zip: FREMONT, OH 43420

Title: D () Delete
Name: RODRIQUEZ, JULIE MRS.
Address: 523 PLEASANT DR.
City-St-Zip: FREMONT, OH 43420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: TEEN, ROD MR.
Address: 4431 E.MARIN LKS
City-St-Zip: PORT CLINTON, OH 43452 40

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: IAN CRAWSHAW

D

04/03/2009

Electronic Signature of Signing Officer or Director

Date