2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011442

Entity Name: REDEMPTION MINISTRIES, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

755 WEST LUMSDEN ROAD BRANDON, FL 33511

Current Mailing Address: New Mailing Address:

P O BOX 2756 VALRICO, FL 33594

FEI Number: 20-3786227 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SELIGMILLER, JULIETTE 4609 HORSESHOEPICK LANE VALRICO, FL 33594 US

OFFICERS AND DIRECTORS:

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

Electronic Signature of Registered Age

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 SELIGMILLER, CHRISTOPHER A SR
 Name:

 Address:
 4609 HORSESHOEPICK LANE
 Address:

 City-St-Zip:
 VALRICO, FL 33594
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 SELIGMILLER, JULIETTE
 Name:

 Address:
 4609 HORSESHOEPICK LANE
 Address:

 City-St-Zip:
 VALRICO, FL 33594
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

Name:STEVENSON, SHARLENEName:BAILEY, LINETTEAddress:755 WEST LUMSDEN ROADAddress:755 WEST LUMSDEN ROAD

City-St-Zip: BRANDON, FL 33511 City-St-Zip: BRANDON, FL 33511

Title: T () Delete Title: T (X) Change () Addition Name: STREET, LAKECIA Name: SELIGMILLER, CHRISTOPHER II

 Address:
 755 WEST LUMSDEN
 Address:
 755 WEST LUMSDEN

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 BRANDON, FL 33511

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: JULIETTE SELIGMILLER VD 04/28/2009