

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011602

FILED
Feb 05, 2009
Secretary of State

Entity Name: TEEN IMPACT MINISTRY, INC.

Current Principal Place of Business:

132 MONTE REAL BOULEVARD
SEBRING, FL 33876

New Principal Place of Business:

Current Mailing Address:

132 MONTE REAL BOULEVARD
SEBRING, FL 33876

New Mailing Address:

FEI Number: 41-2205189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABLES, CLIFFORD M III
551 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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: DP () Delete
Name: ALLCORN, LEE
Address: 132 MONTE REAL BOULEVARD
City-St-Zip: SEBRING, FL 33876

Title: D () Delete
Name: FISHER, WESLEY C
Address: 916 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: CORD, ERIC C
Address: 4687 SOUTH HAMMOCK ROAD
City-St-Zip: ZOLFO SPRINGS, FL 33890

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:

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: LEE M. ALLCORN

DP

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date