## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000011626

FILED May 06, 2010 Secretary of State

Entity Name: TRANSFORMED RELEASE CONVERSION PRISON MINISTRY, INC

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

943 SE BREAKWATER AVE PORT SAINT LUCIE, FL 34983

Current Mailing Address: New Mailing Address:

P. O. BOX 9657

ST. LUCIE, FL 349859657

FEI Number: 20-3810072 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: Name and Address of New Registered Agent:

STEAKIN, WILLIAM 943 SE BREAKWATER AVE. PORT ST. LUCIE, FL 34983 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: PD

Name: STEAKIN, WILLIAM
Address: 943 SE BREAKWATER AVE.
City-St-Zip: PORT ST. LUCIE, FL 349839657

Title: SD

Name: STEAKIN, ANN

Address: 943 SE BREAKWATER AVE. City-St-Zip: PORT ST. LUCIE, FL 349839657

Title: VP

Name: STILLER, DONALD
Address: 3575 ELEVEN MILE RD
City-St-Zip: FORT PIERCE, FL 34954

Title: PRES

Name: STEAKIN, WILLIAM T PRES Address: 943 SE BREAKWATER AVE City-St-Zip: PORTSAINTLUICE, FL 34983

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM STEAKIN PRES 05/06/2010