2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012840

FILED Mar 28, 2009 Secretary of State

Entity Name: THE INTERDENOMINATIONAL MINISTERIAL ALLIANCE, INC.

Current Principal Place of Business: New Principal Place of Business: 2060 COLLIER AVE SUITE # 10 2060 COLLIER AVE FORT MYERS, FL 33901 SUITE #10 FORT MYERS, FL 33901 **Current Mailing Address: New Mailing Address:** P.O.BOX 2544 FT MYERS, FL 33902 US FEI Number: 41-2236868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KELLY, ED JOHNSON, ERIC REV 9790 BLUE STONE CIR 2160 BEN ST FT MYERS, FL 33916 US US FT MYERS, FL 33913 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: REV ERIC JOHNSON 03/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete JOHNSON, ERIC I Name: Name: 9790 BLUE STONE CIRCLE Address: Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: Title: () Delete Title: () Change () Addition BARNES, MICHAEL Name: Name: Address: 3034 ST CHARLES ST Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: () Delete Title: Title: () Change () Addition KELLY, ED Name: Name: 2160 BEN STONE CIR Address: Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: Title: () Delete Title: () Change () Addition Name: JACKSON, BRENDA M Name: Address: 3123 LAFAYETTE STREET Address: City-St-Zip: FT MYERS, FL 33916 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: REV ERIC JOHNSON RA 03/28/2009