2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004119

Title:

Name:

Address:

City-St-Zip:

FILED Apr 26, 2007 Secretary of State

Entity Nan	1e: BREAD OF	F LIFE MINISTRIES, INC			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
463915 ST/ YULEE, FL	ATE ROAD 200 32097) (A1A)			
Current Mailing Address:			New Mailing Address:		
463915 STA YULEE, FL	ATE ROAD 200 32097) (A1A)			
FEI Number:	03-0587417	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	L J HOOD DRIVE INA BEACH, FL				
The above in the State		ubmits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ()[RIZZI, PAUL J PA 856 ROBIN HOO FERNANDINA BE	D DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ()[NELSON, CRYST 3238 LONNIE CF FERNANDINA BE	REWS ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TD () [NELSON, P. ALL 3238 LONNIE CF	Delete EN	Title: Name:	() Change () Addition	
City-St-Zip:	FERNANDINA BE		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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL J. RIZZI 04/26/2007 D

() Delete

RIZZI, HELEN É

5647 DURANT DRIVE

PORT ORANGE, FL 32127

() Change () Addition