

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 14, 2011
Secretary of State

DOCUMENT# N07000001635

Entity Name: HOLY FIRE MINISTRY INT'L, INC.**Current Principal Place of Business:**4242 SWALLOWTAIL DRIVE
NEW PORT RICHEY, FL 34653**New Principal Place of Business:**4242 SWALLOWTAIL DRIVE
NEW PORT RICHEY, FL 34653 US**Current Mailing Address:**4242 SWALLOWTAIL DRIVE
NEW PORT RICHEY, FL 34653**New Mailing Address:**4242 SWALLOWTAIL DRIVE
NEW PORT RICHEY, FL 34653 US**FEI Number:** 20-8449295**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BURKENTINE, RONALD G
4242 SWALLOWTAIL DRIVE
NEW PORT RICHEY, FL 34653 US**Name and Address of New Registered Agent:**BURKENTINE, LINDA M
4242 SWALLOWTAIL DRIVE
NEW PORT RICHEY, FL 34653 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: LINDA MARIE BURKENTINE

02/14/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCP
Name: BURKENTINE, LINDA M
Address: 4242 SWALLOWTAIL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653 US

Title: DV
Name: BUTLER, JEFFREY J
Address: 4744 WEASEL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653 US

Title: DST
Name: BUTLER, TERRI L
Address: 4744 WEASEL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

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: LINDA BURKENTINE

DV

02/14/2011

Electronic Signature of Signing Officer or Director

Date