2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2009
Secretary of State

DOCUMENT# N07000001814

Entity Name: AMBASSADOR FOR JESUS CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

5464 N.E. 1ST TERRACE
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

5464 N.E. 1ST TERRACE
FORT LAUDERDALE, FL 33334 US

Current Mailing Address:

PO BOX 5934
FORT LAUDERDALE, FL 333105934

New Mailing Address:

5464 N.E. 1ST TERRACE
FORT LAUDERDALE, FL 33334 US

FEI Number: 83-0476674 **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:

ALMANORD, LUCIEN REV.
5464 N.E. 1ST TERRACE
FORT LAUDERDALE, FL 33334 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: CPD ( ) Delete
Name: ALMANORD, LUCIEN REV.
Address: 5464 N.E. 1ST TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: VPD ( ) Delete
Name: ALERTE, NOEL
Address: 5464 N.E. 1ST TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: SD ( ) Delete
Name: ALMANORD, LUCKSON R
Address: 5464 N.E. 1ST TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33334

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: REV., LUCIEN ALMANORD PRES 08/31/2009
Electronic Signature of Signing Officer or Director — Date