

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003386

FILED
Apr 23, 2009
Secretary of State

Entity Name: FOUNTAIN OF LIFE INTERNATIONAL MINISTRIES INC.

Current Principal Place of Business:

3541 SW 144TH AVE.
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

3541 SW 144TH AVE.
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 20-8796006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCOTT, ELIZABETH
8263 NW 5TH COURT
MIAMI, FL 33150 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: PD () Delete
Name: PARRISH, SHERRON DR
Address: 3541 SW 144TH AVE.
City-St-Zip: MIRAMAR, FL 33027

Title: VD () Delete
Name: PARRISH, CARL
Address: 3541 SW 144TH AVE.
City-St-Zip: MIRAMAR, FL 33027

Title: TD () Delete
Name: BISHOP, LORETTA
Address: 3541 SW 144TH AVE.
City-St-Zip: MIRAMAR, FL 33027

Title: SD () Delete
Name: MITCHELL, GERMAINE
Address: 8612 N. LEXINGTON DR
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: CORTES, DIONE
Address: P.O BOX 278422
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: WILLIAMS, ANTONIO
Address: P.O. BOX 278422
City-St-Zip: MIRAMAR, FL 33027

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:

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: SHERRON PARRISH

CEO

04/23/2009

Electronic Signature of Signing Officer or Director

Date