

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003833

FILED
Jan 18, 2008
Secretary of State

Entity Name: EBEN-EZER FOUNDATION AND MINISTRIES, INC.

Current Principal Place of Business:

15310 NE 10TH COURT
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

15310 NE 10TH COURT
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 71-1037623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIEL, GEORGES T
995 NORTH MIAMI BEACH BLVD. SUITE 119
MIAMI, FL 33162 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: P () Delete
Name: ROBERTS, JANE MAUDE
Address: 15310 NE 10TH COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VP () Delete
Name: LAFONTANT, JENNIFER
Address: 15310 NE 10TH COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: T () Delete
Name: ALCIME, ANNE MARIE
Address: 15310 NE 10TH COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: S () Delete
Name: NELSON, PAULA
Address: 3864 SW 169TH TERRACE
City-St-Zip: WEST MIRAMAR, FL 33027

Title: D () Delete
Name: LAURENT, MONIQUE
Address: 2131 SW 67TH WAY
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: PIERRE, JACQUESON
Address: 295 NE 165TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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
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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: JANE MAUDE ROBERTS

P

01/18/2008

Electronic Signature of Signing Officer or Director

Date