2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004170

Entity Name: ELEVENTH HOUR MINISTRY, INC.

FILED Jun 03, 2008 Secretary of State

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
6150 W OAKLAND PARK BLVD SUNRISE, FL 333131212			936 NE 62 STREET OAKLAND PARK, FL 33334	
Current Mailing Address:		New Maili	New Mailing Address:	
PO BOX 1 BOCA RA	84 TON, FL 33429			
In accordan	: 02-0803669 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did not d Address of Current Registered Agent:			
4411 NW	S, ROSENIE 18 STREET #403M HILL, FL 33313 US			
	e named entity submits this statement for the poe of Florida.	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Age	nt	Date	
OFFICER	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete MADET, SAINT-ALAIS A 289 NW 19 ST #8 BOCA RATON, FL 33432	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete CHEVALIER, MICHELET 10193 BOCA VISTA BOCA RATON, FL 33431	Title: Name: Address: City-St-Zip:	V (X) Change () Addition SAINT JUSTE, SHELA 463 GAZETTA WAY WEST PALM BEACH, FL 33413	
Title: Name: Address: City-St-Zip:	T () Delete VICTOR, LISETTE 2321 SW 82 WAY NORTH LAUDERDALE, FL 33068	Title: Name: Address: City-St-Zip:	T (X) Change () Addition BEAUVAIS, YVES 360 NW 19 CT POMPANO BEACH, FL 33060 US	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	A () Change (X) Addition SAINT JUSTE J, SANDRA 463 GAZETTA WAY WEST PALM BEACH, FL 33413 US	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	A () Change (X) Addition DIEUDONNE, CARMEL 7771 RIDGEWOOD DR LAKEWORTH, FL 33467 US	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	A () Change (X) Addition DIEUDONNE, KERVEN 7771 RIDGEWOOD DR LAKEWORTH, FL 33467 US	

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: ABRAHAM S MADET P 06/03/2008