

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006580

FILED
Feb 28, 2008
Secretary of State

Entity Name: R.D. BLATCH SR MINISTRIES INC.

Current Principal Place of Business:

9000 NW 20TH AVE
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

9000 NW 20TH AVE
MIAMI, FL 33147

New Mailing Address:

FEI Number: 26-0546431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, WILLIE J
2261 NW 58TH STREET
MIAMI, FL 33142 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: BLATCH SR, RENNIE
Address: 9410 SW 8TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D () Delete
Name: BLATCH, STACY
Address: 9410 SW 8TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D () Delete
Name: JONES, WILLIE J
Address: 2261 NW 58TH STREET
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: KEMP, ANGELA
Address: 3271 NW 178TH STREET
City-St-Zip: PEMBROKE PINES, FL 33056

Title: D () Delete
Name: BRADSHAW, WILLIAM
Address: 3992 NW 107TH STREET
City-St-Zip: OPA LOCKA, FL 33056

Title: D () Delete
Name: GRANT, ELISHA
Address: 21000 NW 14TH PACE # 108
City-St-Zip: MIAMI, FL 33169

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: D (X) Change () Addition
Name: GRANT, ELISHA
Address: 21000 NW 14TH PACE # 108
City-St-Zip: MIAMI, FL 33169

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: RENNIE D BLATCH, SR.

PD

02/28/2008

Electronic Signature of Signing Officer or Director

Date