

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007186

FILED  
Mar 12, 2009  
Secretary of State

**Entity Name:** CHOSEN INTERNATIONAL SCHOOL OF MINISTRY, INC.

**Current Principal Place of Business:**

6422 HWY 90 SUITE D  
MILTON, FL 32570

**New Principal Place of Business:**

**Current Mailing Address:**

6422 HWY 90 SUITE E  
MILTON, FL 32570

**New Mailing Address:**

**FEI Number:** 02-0796318

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILLER, CARMEN  
4156 FUTURA DR  
PENSACOLA, FL 32504 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: F ( ) Delete  
Name: MILLER, CARMEN  
Address: 4156 FUTURA DR  
City-St-Zip: PENSACOLA, FL 32504

Title: AS ( ) Delete  
Name: MILLER, JENNIFER  
Address: 463 HALSEY ST  
City-St-Zip: MILTON, FL 32570

Title: AF ( ) Delete  
Name: PATTERSON, SHANTIA  
Address: 4156 FUTURA DR  
City-St-Zip: PENSACOLA, FL 32504

Title: D ( ) Delete  
Name: PATTERSON, CHUNTELL  
Address: 4156 FUTURA DR  
City-St-Zip: PENSACOLA, FL 32504

**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:

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: CARMEN MILLER

PAST

03/12/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date