

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008296

FILED
Apr 21, 2008
Secretary of State

Entity Name: GIRLS GONE GOD MINISTRIES, INC.

Current Principal Place of Business:

1480 MUIR CIRCLE
CLERMONT, FL 34711

New Principal Place of Business:

16921 APOPKA SPRINGS BLVD.
MONTVERDE, FL 34756

Current Mailing Address:

1480 MUIR CIRCLE
CLERMONT, FL 34711

New Mailing Address:

16921 APOPKA SPRINGS BLVD.
MONTVERDE, FL 34756

FEI Number: 26-1123873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARRIOIN, CYNTHIA LYNN
1480 MUIR CIRCLE
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

CARRIOIN, CYNTHIA LYNN
16921 APOPKA SPRINGS BLVD.
MONTVERDE, FL 34756 US

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:

04/21/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARRION, CYNTHIA
Address: 1480 MUIR CIRCLE
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: WASILIEW, HEATHER
Address: 1338 LOCHBREEZE WAY
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: THOMPSON, JODI
Address: 636 STRIHAL LOOP
City-St-Zip: OAKLAND, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CARRION, CYNTHIA
Address: 16921 APOPKA SPRINGS BLVD.
City-St-Zip: MONTVERDE, FL 34756

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: CYNTHIA L. CARRION

PRES

04/21/2008

Electronic Signature of Signing Officer or Director

Date