

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009534

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** THE BALM IN GILEAD MINISTRIES, INC.

**Current Principal Place of Business:**

1337 WILLOW CREST DR.  
CLERMONT, FL 347112799

**New Principal Place of Business:**

**Current Mailing Address:**

1337 WILLOW CREST DR.  
CLERMONT, FL 347112799

**New Mailing Address:**

**FEI Number:** 32-0233161

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARUCH, SHANNON K  
1337 WILLOW CREST DR.  
CLERMONT, FL 347112799 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: D ( ) Delete  
Name: BARUCH, SHANNON K  
Address: 1337 WILLOW CREST DR.  
City-St-Zip: CLERMONT, FL 347112799

Title: D ( ) Delete  
Name: BARUCH, SHANNON K II  
Address: 1337 WILLOW CREST DR.  
City-St-Zip: CLERMONT, FL 347112799

Title: D ( ) Delete  
Name: BARUCH, PAULETTE D  
Address: 1337 WILLOW CREST DR.  
City-St-Zip: CLERMONT, FL 347112799

**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:

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: SHANNON K. BARUCH

PRES

04/14/2009

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

\_\_\_\_\_  
Date