

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010558

FILED
Feb 28, 2008
Secretary of State

Entity Name: SMIFINANCIAL MINISTRIES, INC.

Current Principal Place of Business:

468 SW 15TH DRIVE
BOCA RATON, FL 33432

New Principal Place of Business:

1225 NW 17TH AVE, SUITE 101
DELRAY BEACH, FL 33444

Current Mailing Address:

468 SW 15TH DRIVE
BOCA RATON, FL 33432

New Mailing Address:

1225 NW 17TH AVE, SUITE 101
DELRAY BEACH, FL 33444

FEI Number: 61-1543343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SEABROOKE, DAVID
468 SW 15TH DRIVE
BOCA RATON, FL 33432 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: SEABROOKE, DAVID
Address: 468 SW 15TH DRIVE
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: SEABROOKE, JOHN
Address: 468 SW 15TH DRIVE
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: FRANZONE, ANDREA
Address: 1500 SW 5TH STREET
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SEABROOKE, DAVID
Address: 468 SW 15TH DRIVE
City-St-Zip: BOCA RATON, FL 33432

Title: DVP (X) Change () Addition
Name: SEABROOKE, JOHN
Address: 468 SW 15TH DRIVE
City-St-Zip: BOCA RATON, FL 33432

Title: DST (X) Change () Addition
Name: FRANZONE, ANDREA
Address: 1500 SW 5TH STREET
City-St-Zip: BOCA RATON, FL 33486

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: ANDREA FRANZONE

DST

02/28/2008

Electronic Signature of Signing Officer or Director

Date