## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000012103

WIGUEL, EDOUISSAINT J

WEST PALM BEACH, FL 33417

4642 MYRTLE LAINE

Name:

Address:

City-St-Zip:

FILED Mar 01, 2008 Secretary of State

Entity Nar	ne: GOOD SA	MARITAN MINISTRY, INC.			
Current P	rincipal Place	of Business:	New Principal Place	of Business:	
425 HURO WEST PAL	N PL .M BEACH, FL	33409			
Current M	ailing Address	<b>s:</b>	New Mailing Address	New Mailing Address:	
425 HURO WEST PAL	N PL .M BEACH, FL	33409			
FEI Number:	59-3795219	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	N PL M BEACH, FL named entity s		purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR		a Signature of Degistered As	vont	 Date	
Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () PROPHETE, CE 425 HURON PL WEST PALM BE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () JOSEPH, JEAN 519 TOCCOA RO WEST PALM BE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	D ()	Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PROPHETE CEME 03/01/2008 D