2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012214

FILED Apr 30, 2009 Secretary of State

Entity Name: ASSOCIATION OF EVANGELICAL MINISTERS OF ORLANDO, INC.

Current Principal Place of Business: New Principal Place of Business:

7751 KINGSPOINTE PKEY STE 125 7061 GRAND NATIONAL DR

ORLANDO, FL 32819 STE 120

ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

7751 KINGSPOINTE PKEY STE 125 7061 GRAND NATIONAL DR

ORLANDO, FL 32819 STE 120

ORLANDO, FL 32819

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

LARSON, CAROLINE LARSON, CAROLINE 8818 COMMODITY CIR STE 400 8810 COMMODITY CIR

ORLANDO, FL 32819 STE 17 ORLANDO, FL 32819 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: CAROLINE LARSON 04/30/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

FERNADES, RITA L FERNANDES, RITA L Name: Name: 5850 LAKEHURST DR STE 150-25 Address: 5850 LAKEHURST DR STE 150-25 Address:

City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: () Delete Title: () Change () Addition

DE OLIVEIRA, EDUARDO H Name: Name: Address: 6715 MISSION CLUB BLVD STE 101 Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip:

Title: DS () Delete Title: () Change () Addition

BOSELLI, ROBERTO L Name: Name: Address: 8302 TANGELO TREE DR Address: City-St-Zip: ORLANDO, FL 32836 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: ROBERTO BOSELLI S 04/30/2009