

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000223

FILED
Apr 30, 2009
Secretary of State

Entity Name: FAMILY RECONCILIATION MINISTRIES INTERNATIONAL INC.

Current Principal Place of Business:

1149 W 10TH ST.
JACKSONVILLE, FL 32209

New Principal Place of Business:

11291 HARTS ROAD
601
JACKSONVILLE, FL 32218

Current Mailing Address:

PO BOX 13213
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 26-1321905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITTEN, MARK A.
1149 W 10TH ST.
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

FITTEN, MARK A.
11291 HARTS ROAD
601
JACKSONVILLE, FL 32218 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:

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FITTEN, MARK A.
Address: 1149 W 10TH ST.
City-St-Zip: JACKSONVILLE, FL 32209

Title: V () Delete
Name: FITTEN, SHARON R.
Address: 1149 W 10TH ST.
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FITTEN, MARK A.
Address: 11291 HARTS ROAD #601
City-St-Zip: JACKSONVILLE, FL 32218

Title: V (X) Change () Addition
Name: FITTEN, SHARON R.
Address: 11291 HARTS ROAD #601
City-St-Zip: JACKSONVILLE, FL 32218

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: SHARON R FITTEN

V

04/30/2009

Electronic Signature of Signing Officer or Director

Date