

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001089

FILED
Aug 31, 2009
Secretary of State

Entity Name: SHALOM TIQVAH MINISTRIES INC.

Current Principal Place of Business:

16851 PINE FOREST DR.
WHITE SPRINGS, FL 32096 US

New Principal Place of Business:

531 NW PALM DR
LAKE CITY, FL 32055 US

Current Mailing Address:

16851 PINE FOREST DR.
WHITE SPRINGS, FL 32096 US

New Mailing Address:

531 NW PALM DR
LAKE CITY, FL 32055 US

FEI Number: 27-0840252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOORE, LINDA L
16851 PINE FOREST DR.
WHITE SPRINGS, FL 32096 US

Name and Address of New Registered Agent:

MOORE, LINDA L
531 NW PALM DR
LAKE CITY, FL 32055 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: LINDA L MOORE

08/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARY, ERNESTO
Address: P.O. BOX 5494
City-St-Zip: KATY, TX 77491 US

Title: VP () Delete
Name: CARY, MIKEL
Address: 13600 W. CANYON CREEK DR.
City-St-Zip: SURPRISE, AZ 85374 US

Title: S/T () Delete
Name: LANGFORD, JEFF
Address: 2479 BRYNFIELD COVE
City-St-Zip: SUWANEE, GA 30024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: LINDA, MOORE L
Address: 531 PALM DR
City-St-Zip: LAKE CITY, FL 32055 US

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: LINDA L MOORE

S/T

08/31/2009

Electronic Signature of Signing Officer or Director

Date