2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001090

FILED Jun 26, 2009 Secretary of State

Entity Nar	ne: FAMILY UPL	IFTMENT AND ENRICHME	NT MINISTRIES, INC	O.	
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
9301 ASLE MIRAMAR,					
Current Mailing Address:		New Maili	New Mailing Address:		
9301 ASHL MIRAMAR,					
FEI Number: In accordance		FEI Number Applied For() (b), F.S., the corporation did not	FEI Number Not Appl receive the prior notic		
Name and	Address of Cur	rent Registered Agent:	Name and	Address of New Registered Agent:	
ANDERSC 9301 ASHL	N, DOREEN MS	3.			
MIRAMAR,	FL 33025 US	3			
in the State	e of Florida.	Signature of Registered Ager		ts registered office or registered agent, or both, Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () De ANDERSON, DORI 9301 ASHLEY DRI MIRAMAR, FL 330	EEN MS. VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () De ANDERSON, DORI 9301 ASHLEY DRI MIRAMAR, FL 330	EEN MS. VE	Title: Name: Address: City-St-Zip:	O (X) Change () Addition ANDERSON, CARLTON MR 9301 ASHLEY DRIVE MIRAMAR, FL 33025	
Title: Name: Address:	SEC () De ANDERSON, DORI 9301 ASHLEY DRI	EEN MS.	Title: Name: Address:	SEC (X) Change () Addition EDWARDS, YVONNE MS.	

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: DOREEN ANDERSON D 06/26/2009