

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 24, 2010
Secretary of State

DOCUMENT# N08000001259

Entity Name: COLBY WEAVER'S UNVEILED MINISTRIES, INC.**Current Principal Place of Business:**3465 HAUSER STREET
2-201
LA, CA 90036**New Principal Place of Business:**3000 SOUTH JOHN YOUNG PARKWAY
ORLANDO, FL 32805**Current Mailing Address:**3465 HAUSER STREET
2-201
LA, CA 90036**New Mailing Address:**3000 SOUTH JOHN YOUNG PARKWAY
ORLANDO, FL 32805**FEI Number:** 80-0173607**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVID, UTH PASTOR
9173 DOLLANGER COURT
ORLANDO, FL 32819 US**Name and Address of New Registered Agent:**DAVID, UTH PASTOR
3000 SOUTH JOHN YOUNG PARKWAY
ORLANDO, FL 32805 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:

08/24/2010

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: D P
Name: WEAVER, COLBY
Address: 8261 TIVOLI DRIVE
City-St-Zip: ORLANDO, FL 32836

Title: D VP
Name: DAVID, UTH PASTOR
Address: 3000 SOUTH JOHN YOUNG PARKWAY
City-St-Zip: ORLANDO, FL 32805

Title: D VP
Name: KEITH, HARMON
Address: 1709 JOHNSON ROAD
City-St-Zip: SPRINGDALE, AR 72762

Title: D S
Name: CUMMINGS, NAN
Address: 2301 TOWER DRIVE
City-St-Zip: MONROE, LA 71201

Title: D T
Name: DAVID, EMERY
Address: 2301 TOWER DRIVE
City-St-Zip: MONROE, LA 71201

I hereby 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 all other like empowered.

SIGNATURE: DAVID EMERY

D T

08/24/2010

Electronic Signature of Signing Officer or Director_____
Date