

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002535

FILED
May 01, 2009
Secretary of State

Entity Name: MARTYR LIVING MINISTRY INC.

Current Principal Place of Business:

237 COUNTRYWALK PLACE
UNIT 101
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

355 NORTHLAKE DR
UNIT 1015
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

237 COUNTRYWALK PLACE
UNIT 101
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

355 NORTHLAKE DR
UNIT 1015
ALTAMONTE SPRINGS, FL 32701

FEI Number: 26-2602672 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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BOULDING, BEMBEAMANDO
Address: 237 COUNTRYWALK PLACE, UNIT 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VPSD () Delete
Name: BOULDING, DAWN
Address: 237 COUNTRYWALK PLACE, UNIT 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: PRISCIANDARO, MARIO
Address: 237 COUNTRYWALK PLACE, UNIT 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BOULDING, BEMBEAMANDO
Address: 355 NORTHLAKE DR #1015
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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

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

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: BEMBEAMANDO BOULDING

MR.

05/01/2009

Electronic Signature of Signing Officer or Director

Date