2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002768

FILED Apr 29, 2009 Secretary of State

Entity Name: NANCY VELDMAN MINISTRIES INC.

Current Principal Place of Business:			New Principal Place of Business:	
	DLIA STREET DSA BEACH, FL	_ 32459		
Current Mailing Address:			New Mailing Address:	
	DLIA STREET DSA BEACH, FL	_ 32459		
FEI Numbei	r: 26-2615385	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
SUITE A SHALIMA	GLIN PARKWA R, FL 32579 L	JS	ourness of shonging its remistere	od office or registered agent as bette
	e named entity te of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
SIGNATU				
		. 0	1	
	Electron	nic Signature of Registered Ag	ent	Date
OFFICER	S AND DIREC			Date ES TO OFFICERS AND DIRECTORS
Title: Name: Address:	S AND DIREC	TORS:) Delete GRETE I AVENUE		
Title: Name: Address: City-St-Zip: Title: Name: Address:	D (VAUSES, MAR 100 HAMILTON PANAMA CITY	TORS:) Delete GRETE I AVENUE FL 32401) Delete	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	D (VAUSES, MAR 100 HAMILTON PANAMA CITY, D (VAUSES, BUD 100 HAMILTON PANAMA CITY,	TORS:) Delete GRETE I AVENUE FL 32401) Delete I AVENUE FL 32401) Delete I AVENUE FL 32401	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTOR:

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: NANCY VELDMAN D 04/29/2009