

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003438

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: SOZO MINISTRIES INTERNATIONAL INC.

**Current Principal Place of Business:**

288 ROCK SPRINGS DR  
POINCIANA, FL 34759

**New Principal Place of Business:**

**Current Mailing Address:**

288 ROCK SPRINGS DR  
POINCIANA, FL 34759

**New Mailing Address:**

FEI Number: 26-2454100

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOTSAVAGE, GLENDA  
288 ROCK SPRINGS DR  
POINCIANA, FL 34759 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: DPV ( ) Delete  
Name: MOTSAVAGE, GLENDA  
Address: 288 ROCK SPRINGS DR  
City-St-Zip: POINCIANA, FL 34759

Title: DTS ( ) Delete  
Name: MOTSAVAGE, STANLEY  
Address: 288 ROCK SPRINGS DR  
City-St-Zip: POINCIANA, FL 34759

Title: D ( ) Delete  
Name: LIPLES, DONNA  
Address: 145 NORTHPOINT DR  
City-St-Zip: OLYPHANT, PA 18447

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: GLENDA MOTSAVAGE

DPV

03/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date