

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004240

FILED
Mar 20, 2009
Secretary of State

Entity Name: STAND FIRM MINISTRIES INTL. CORP.

Current Principal Place of Business:

150 LAKE NANCY LANE
#418
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

150 LAKE NANCY LANE
#418
WEST PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: 61-1561296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHMIDT, AKIVA
150 LAKE NANCY LANE
#418
WEST PALM BEACH, FL 33411 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: DP () Delete
Name: SCHMIDT, AKIVA
Address: 150 LAKE NANCY LANE #418
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: DVP () Delete
Name: SCHMIDT, ESTHER
Address: 150 LAKE NANCY LANE #418
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: D () Delete
Name: BANNERMAN, LAURIE
Address: 5100 60TH ST. APT.300
City-St-Zip: RED DEER, ALBERTA, CANADA, XX T4N 1C4 XX

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: AKIVA SCHMIDT

DP

03/20/2009

Electronic Signature of Signing Officer or Director

Date