2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004417

FILED Apr 30, 2009 Secretary of State

Entity Name: RIVER OF LIFE MINISTRIES OF THE TREASURE COAST, INC

Current Principal Place of Business: New Principal Place of Business:

1580 NW FEDERAL HWY STUART, FL 34994 US

Current Mailing Address: New Mailing Address:

PO BOX 43 1580 NW FEDERAL HWY PALM CITY, FL 34991 US STUART, FL 34994 US

FEI Number: 32-0247163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ENGLAND, MARK S

1669 SW WILDCAT TRAIL

STUART, FL 34997 US

ENGLAND, MARK S

2491 SE GILLETTE AVE
PORT ST. LUCIE, FL 34952 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: MARK S ENGLAND 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete Title: DP (X) Change () Addition E: ENGLAND, MARK S Name: ENGLAND, MARK S

 Name:
 ENGLAND, MARK S
 Name:
 ENGLAND, MARK S

 Address:
 1669 SW WILDCAT TRL
 Address:
 2491 SE GILLETTE AVE

 City-St-Zip:
 STUART, FL 34997 US
 City-St-Zip:
 PORT ST. LUCIE, FL 34952 US

Title: DST () Delete Title: DST (X) Change () Addition

 Name:
 GREGG, GARY
 Name:
 KAYLOR, MICHAEL

 Address:
 1637 SW MEADOWVIEW
 Address:
 8602 NW 27TH CT

City-St-Zip: PALM CITY, FL 34990 US City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: DVP () Delete Title: DVP (X) Change () Addition

 Name:
 ENGLAND, JOY B
 Name:
 ENGLAND, JOY B

 Address:
 1669 SW WILDCAT TRL
 Address:
 2491 SE GILLETTE AVE

 City-St-Zip:
 STUART, FL 34997 US
 City-St-Zip:
 PORT ST. LUCIE, FL 34952 US

Title: D () Delete Title: () Change () Addition

 Name:
 KENDALL, RICK
 Name:

 Address:
 1429 SE PROCTOR LN
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34983 US
 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: MARK S ENGLAND P 04/30/2009