

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005272

FILED
May 12, 2009
Secretary of State

Entity Name: LIBERTY HALL MINISTRY INC

Current Principal Place of Business:

2692 N UNIVERSITY DR
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

2692 N UNIVERSITY DR
SUNRISE, FL 33322

New Mailing Address:

FEI Number: 26-2707595 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:

COLLINS, DELORIS
501 N 69 WAY
HOLLYWOOD, FL 33024 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: P () Delete
Name: CLARE, PANCHETTA
Address: 1830 SW 81 AVE #4207
City-St-Zip: N LAUDERDALE, FL 33068

Title: VP () Delete
Name: RHODEN, ASTLEY
Address: 9449 SAVANNAH ESTATE DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: SEC () Delete
Name: RHODEN, ANDREA
Address: 454 COTTON WOOD LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: TREA () Delete
Name: DEMETRIUS, KAYLOY
Address: 454 COTTON WOOD LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

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:

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: PANCHETTA CLARE

P

05/12/2009

Electronic Signature of Signing Officer or Director

Date