

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007960

FILED
Apr 12, 2009
Secretary of State

Entity Name: RESTORATION MINISTRIES WORLDWIDE, INC.

Current Principal Place of Business:

4018 W. LA SALLE ST
TAMPA, FL 33607

New Principal Place of Business:

8433 N. RIVER DUNE ST.
TAMPA, FL 33617 US

Current Mailing Address:

PO BOX 22481
TAMPA, FL 33622

New Mailing Address:

PO BOX 22481
TAMPA, FL 33622 US

FEI Number: 26-3193995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WATKINS, DAVID R
4018 W. LA SALLE ST
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

WATKINS, DAVID R PASTOR
8433 N. RIVER DUNE ST
TAMPA, FL 33617 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: ELDER DAVID R WATKINS

04/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WATKINS, DAVID R ELDER
Address: 4018 W LA SALLE ST
City-St-Zip: TAMPA, FL 33607

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WATKINS, DAVID R PASTOR
Address: 8433 N. RIVER DUNE ST
City-St-Zip: TAMPA, FL 33617 US

Title: VP () Change (X) Addition
Name: COCHRAN, MARK L
Address: 3912 E. DELEUIL AVENUE
City-St-Zip: TAMPA, FL 33610 US

Title: SEC () Change (X) Addition
Name: GRADDY, TONJA
Address: 2914 KELLY RIDGE LANE
City-St-Zip: TAMPA, FL 33604 US

Title: T () Change (X) Addition
Name: LOCKETT, ARLENE
Address: 400 E. HARRISON #703
City-St-Zip: TAMPA, FL 33602 US

Title: T () Change (X) Addition
Name: THOMAS, JULIA M
Address: 3411 E. 33RD AVE
City-St-Zip: TAMPA, FL 33610 US

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: ELDER DAVID R. WATKINS

P

04/12/2009

Electronic Signature of Signing Officer or Director

Date