

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009907

FILED
Feb 24, 2009
Secretary of State

Entity Name: HOLY SPIRIT INTERNATIONAL EVANGELISTIC MINISTRIES, INC.

Current Principal Place of Business:

2172 GROVE DRIVE
NAPLES, FL 34120

New Principal Place of Business:

Current Mailing Address:

2172 GROVE DRIVE
NAPLES, FL 34120

New Mailing Address:

FEI Number: 30-0511740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPOLO, ROSE EVANGEL
2172 GROVE DRIVE
NAPLES, FL 34120 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: D () Delete
Name: CAMPOLO, ROSE EVANGEL
Address: 2172 GROVE DRIVE
City-St-Zip: NAPLES, FL 34120

Title: D () Delete
Name: MAIALE, GRACE PASTOR
Address: 105 SADDLE COVE ROAD
City-St-Zip: BOHEMIA, NY 11716

Title: D () Delete
Name: RONZIO, CHRISTINE
Address: 2235 GROVE DRIVE
City-St-Zip: NAPLES, FL 34120

Title: D (X) Delete
Name: LONG, BIANCA
Address: 161-1ST STREET NW
City-St-Zip: NAPLES, FL 34120

Title: D (X) Delete
Name: LONG, BIANCA
Address: 161-1ST STREET NW
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MAIALE, GRACE PASTOR
Address: 105 SADDLE COVE ROAD
City-St-Zip: BOHEMIA, NY 11716 US

Title: D (X) Change () Addition
Name: CAMPOLO, STEPHEN
Address: 2172 GROVE DRIVE
City-St-Zip: NAPLES, FL 34120 US

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: ROSE CAMPOLO

OFF.

02/24/2009

Electronic Signature of Signing Officer or Director

Date