

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010099

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: WORLD SHAKER MINISTRY, INC.

## Current Principal Place of Business:

1935 WEST COURT  
WEST PALM BEACH, FL 33406

## New Principal Place of Business:

## Current Mailing Address:

1935 WEST COURT  
WEST PALM BEACH, FL 33406

## New Mailing Address:

FEI Number: 20-8505571

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STREIFEL, THOMAS  
1935 WEST COURT  
WEST PALM BEACH, FL 33406 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: QUILES, DAVID E  
Address: 4402 BEECH DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DV ( ) Delete  
Name: STREIFEL, THOMAS  
Address: 1935 WEST COURT  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DS (X) Delete  
Name: GUSS, ROBERT  
Address: 12397 PROSPERITY FARMS RD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DT ( ) Delete  
Name: STREIFEL, RACHAEL  
Address: 1935 WEST COURT  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D (X) Delete  
Name: GUGLIUZZA, ROBERT  
Address: 4327 BEECH DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D ( ) Delete  
Name: NELSON, GAVIN  
Address: 850 NW 86TH AVE APT 515  
City-St-Zip: PLANTATION, FL 33324

## 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:

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: TOM STREIFEL

DV

02/19/2009

Electronic Signature of Signing Officer or Director

Date