2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010875

FILED Apr 24, 2009 Secretary of State

Entity Name: THE TOTAL GOSPEL PETITIONARY INTERNATIONAL MINISTRIES INC.

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

4011 NORTH UNIVERSITY DRIVE 6550 HARBOUR ROAD

SUITE H212 NORTH LAUDERDALE, FL 33068

SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

4011 NORTH UNIVERSITY DRIVE 6550 HARBOUR ROAD

SUITE H212 NORTH LAUDERDALE, FL 33068 SUNRISE, FL 33351

FEI Number: 90-0429849 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAMPBELL, CLYTIE CAMPBELL, CLYTIE 3296 N S.R. 7 3296 N. STATE ROAD 7

LAUDERDALE LAKES, FL 33319 US LAUDERDALE LAKES, FL 33319 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: 04/24/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: CALDER, LAURISTON Name: CALDER, LAURISTON
Address: 4011 NORTH UNIVERSITY DRIVE,, SUITE H212 Address: 6550 HARBOUR ROAD

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: NORTH LAUDERDALE, FL 33068

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

 Name:
 CRAYTON, ANNETTE
 Name:

 Address:
 5962 NW 25TH PLACE
 Address:

 City-St-Zip:
 SUNRISE, FL 33313
 City-St-Zip:

 Name:
 CAMPBELL, PEGGY
 Name:
 CAMPBELL, CLYTIE

 Address:
 4011 NORTH UNIVERSITY DRIVE,, SUITE H212
 Address:
 3296 N. STATE ROAD 7

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: LAUDERDALE LAKES, FL 33319

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

 Name:
 CAMPBELL, CLYTIE
 Name:

 Address:
 3296 N S.R.7
 Address:

 City-St-Zip:
 LAUDERDALE LAKES, FL 33324
 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: LAURISTON C. CALDER D 04/24/2009