

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003092

FILED
Mar 29, 2011
Secretary of State

Entity Name: ISLAND IMPACT MINISTRIES, INC.

Current Principal Place of Business:

2424 SE INDIAN ST
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6324
STUART, FL 34997 US

New Mailing Address:

FEI Number: 20-2327357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, ROBERT W
4837 SE CHILES CT
STUART, FL 34997 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: PD
Name: NELSON, ROBERT W
Address: 4837 SE CHILES CT
City-St-Zip: STUART, FL 34997

Title: VD
Name: NELSON, KELLI L
Address: 4837 SE CHILES CT
City-St-Zip: STUART, FL 34997

Title: SD
Name: MCMANUS, THOMAS
Address: 205 HALSEY ST.
City-St-Zip: SOUTHAMPTON, NY 11968

Title: TD
Name: PENDELTON, CHARLOTTE
Address: 65 RAYNOR RD
City-St-Zip: RIDGE, NY 11961

Title: D
Name: BLACKMORE, ROGER
Address: 35 PINE RD.
City-St-Zip: CORAM, NY 11727

Title: D
Name: PAPOTTO, JOSEPH
Address: 322 ST. ANDREWS LA.
City-St-Zip: MYRTLE BCH, SC 29588

I hereby 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 all other like empowered.

SIGNATURE: ROBERT W NELSON

PD

03/29/2011

Electronic Signature of Signing Officer or Director

Date