

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007423

**FILED**  
**Feb 22, 2010**  
**Secretary of State**

**Entity Name:** MORE THAN CONQUERORS EVANGELISTIC MINISTRIES INC.

**Current Principal Place of Business:**

637 ROYAL LAKE CIR., APT. N 302  
ORLANDO, FL 32818

**New Principal Place of Business:**

5178 EDWINA STREET  
ORLANDO, FL 32811

**Current Mailing Address:**

P. O. BOX 617061  
ORLANDO, FL 328617061

**New Mailing Address:**

FEI Number: 90-0460954      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ARCHIE, DOUGLAS C SR.  
637 ROYAL LAKE CIR., APT. N 302  
ORLANDO, FL 32818    US

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

ARCHIE, DOUGLAS C SR.  
5178 EDWINA STREET  
ORLANDO, FL 32811    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: DOUGLAS C ARCHIE, SR.

02/22/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CEOD  
Name: ARCHIE, DOUGLAS C SR.  
Address: 5178 EDWINA STREET  
City-St-Zip: ORLANDO, FL 32811

Title: SVP  
Name: RUSS, SHIRLEY  
Address: 3020 BARON LANE  
City-St-Zip: TALLAHASSEE, FL 32305

Title: D  
Name: CONNELLY, MANDY  
Address: 1316 LAWNE BLVD.  
City-St-Zip: ORLANDO, FL 32808

Title: D  
Name: ARCHIE, RUBY  
Address: 5178 EDWINA ST  
City-St-Zip: ORLANDO, FL 32811

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: DOUGLAS C ARCHIE, SR.

CEOD

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date