

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008214

FILED
May 04, 2010
Secretary of State

Entity Name: EMBASSY MINISTRIES INTERNATIONAL INC.

Current Principal Place of Business:

5485 26TH ST. S, SUITE 33
ST PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

5485 26TH ST. S, SUITE 33
ST PETERSBURG, FL 33712

New Mailing Address:

FEI Number: 27-0542650 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PETERSON, AUSTIN JR
5485 26TH ST. S, SUITE 33
ST PETERSBURG, FL 33712 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: PETERSON, LINDA L DR.
Address: PO BOX 654
City-St-Zip: BAY PINES, FL 33744

Title: D
Name: VANHORN, BENIEVE S
Address: PO BOX 654
City-St-Zip: BAY PINES, FL 33744

Title: D
Name: PETERSON, WENDY
Address: PO BOX 654
City-St-Zip: BAY PINES, FL 33744

Title: D
Name: JOHNSON, ALBERT L
Address: PO BOX 654
City-St-Zip: BAY PINES, FL 33744

Title: D
Name: NOONER, LISA P
Address: PO BOX 654
City-St-Zip: BAY PINES, FL 33744

Title: D
Name: WILLIAMS, MICHELLE
Address: PO BOX 654
City-St-Zip: BAY PINES, FL 33744

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: AUSTIN PETERSON JR.

MR.

05/04/2010

Electronic Signature of Signing Officer or Director

Date