

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20301

FILED
Jan 14, 2008
Secretary of State

Entity Name: MINISTERIO RENACER, INC.

Current Principal Place of Business:

1030 BAISDEN RD.
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

1820 MONUMENT RD.
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3048970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSQUE, JOSE' L
1820 MONUMENT ROAD
JACKSONVILLE, FL 32225 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 () Delete
Name: BOSQUE, JOSE L PBR
Address: 1820 MONUMENT ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: AGOSTO, DUBEL
Address: 1010-1 BAISDEN RD.
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: BOSQUE-PEREZ, MONIQUE D DOCTOR
Address: 1030 BAISDEN ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD () Delete
Name: CHARLES, JEAN D
Address: 10275 OLD ST. AUGUSTINE RD #602
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOSQUE, JOSE L
Address: 1820 MONUMENT ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD (X) Change () Addition
Name: BOSQUE, MARCOS D
Address: 1010 BAISDEN RD.
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change () Addition
Name: DOORN, GLYNICE MAMA
Address: 1403 N E 51 LOOP
City-St-Zip: OCALA, FL 34479

Title: VP (X) Change () Addition
Name: ATKIN, DON
Address: 1303 CURRY WAY
City-St-Zip: MATHEWS, NC 28104

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: JOSE L. BOSQUE

PD

01/14/2008

Electronic Signature of Signing Officer or Director

Date