

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23702

FILED
Apr 14, 2009
Secretary of State

Entity Name: RIVERS OF GRACE MINISTRIES, INC.

Current Principal Place of Business:

11989 SW 56 STREET
REAR BUILDING
MIAMI, FL 33175 US

New Principal Place of Business:

Current Mailing Address:

18312 SW 94TH CT.
MIAMI, FL 331571753 US

New Mailing Address:

FEI Number: 65-0025405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRERO, RADAMES
18312 SW 94 CT
MIAMI, FL 33157 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: PTRD () Delete
Name: MARRERO, RADAMES PRES
Address: 18312 SW 94TH CT.
City-St-Zip: MIAMI, FL 33157

Title: DS () Delete
Name: PEREZ, ALBERTO DIR
Address: 14216 SW 132 AVENUE
City-St-Zip: MIAMI, FL 33186

Title: DS () Delete
Name: MENDOZA, CARLOS DIR
Address: 14601 SW 126 PL
City-St-Zip: MIAMI, FL 33186

Title: ADM (X) Delete
Name: MARRERO, NANCY ADMIN
Address: 18312 SW 94TH CT
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: MARRERO, NANCY DIR
Address: 18312 SW 94 CT
City-St-Zip: MIAMI, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RADAMES MARRERO

PTRD

04/14/2009

Electronic Signature of Signing Officer or Director

Date