2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24141

FILED Apr 09, 2008 Secretary of State

Entity Name: NEW MOUNT MORIAH CHRISTIAN MINISTRY, INC.

Current Principal Place of Business: New Principal Place of Business: 676 CHRISTOPHER ST ST. AUGUSTINE, FL 32084 LIS **Current Mailing Address: New Mailing Address:** 676 CHRISTOPHER ST 650 CHRISTOPHER ST ST. AUGUSTINE, FL 32084 US ST. AUGUSTINE, FL 32084 US FEI Number: 59-3078341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STAFFORD, RONALD L REV STAFFORD, RONALD L REV. 655 CHRISTOPHER STREET 15 CHRISTÓPHER STREET ST AUGUSTINE, FL 32084 US US ST AUGUSTINE, FL 32084 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: 04/09/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STAFFORD, RONALD L Name: Name: 15 CHRISTOPHER ST Address: Address: City-St-Zip: SAINT AUGUSTINE, FL 32084 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: ELLIS, CHARLES Name: ELLIS, CHARLES Address: 3678 CRAZY HORSE TRAIL Address: 725 WILLOW WOOD PLACE City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: SAINT AUGUSTINE, FL 32086 Title: () Delete Title: () Change () Addition STAFFORD, EVELYN C Name: Name: 655 CHRISTOPHER ST Address: Address: City-St-Zip: SAINT AUGUSTINE, FL 32084 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WILLIAMS, BARBARA J Name: STEVENS, CATHERINE 866 COLLIER BLVD Address: Address: 531 RAILROAD STREET City-St-Zip: ST. AUGUSTINE, FL 32095 City-St-Zip: ST. AUGUSTINE, FL 32084 Title: () Delete Title: () Change () Addition BOROM, GEORGE Name: Name: 441 N. CLAY STREET Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32095 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: RONALD L. STAFFORD D 04/09/2008