

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25394

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Entity Name:** UTTERMOST MIRACLE CHURCH AND BIBLE SCHOOL OF THE PROPHETS, INC.

**Current Principal Place of Business:**

3794 HY 231 & 73 CORNER  
MARRIANNA, FL 32446

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 217  
MARIANNA, FL 32447

**New Mailing Address:**

**FEI Number:** 58-1887356

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOMBARDI, ANDREW J SR  
3794 CORNER OF HWY 73 & 231 NO.  
MARIANNA, FL 32446 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: P  
Name: LOMBARDI, ANDREW J SR, PAS  
Address: 3794 CORNER OF 73 & 231  
City-St-Zip: MARIANNA, FL 32447

Title: VP  
Name: LOMBARDI, ANNA F EVAN  
Address: 837 SANDERSON RD  
City-St-Zip: JOHNSTON, RI 02919

Title: S  
Name: ENFINGER, GARY REV.  
Address: 2742 REDHOSS LANE  
City-St-Zip: BONIFAY, FL 32425

Title: T  
Name: BROWN, MARIE EVA  
Address: 226 AUTUM LAKE WAY  
City-St-Zip: MCDONOUGH, GA 30250

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: ANDREW LOMBARDI

P

01/21/2010

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

\_\_\_\_\_  
Date