

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 21, 2009
Secretary of State**

DOCUMENT# N29092

Entity Name: LIVELY STONES FOR JESUS MINISTRIES, INC.

Current Principal Place of Business:

835 NW 119 ST
NORTH MIAMI, FL 33168 US

New Principal Place of Business:

Current Mailing Address:

835 NW 119 ST
NORTH MIAMI, FL 33168 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOWLES, THELMA
1700 NW 67TH AVE
#414
MIAMI, FL 33015 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: TD () Delete
Name: KNOWLES, BERLISAN
Address: 17000 NW 67TH AVE 331
City-St-Zip: MIAMI LAKES, FL 33015

Title: SD () Delete
Name: WHATLEY, MAE
Address: 4350 N.W. 187TH ST
City-St-Zip: MIAMI, FL 33055

Title: MD () Delete
Name: KNOWLES, BRIAN
Address: 12957 SW 24TH STREET
City-St-Zip: MIRAMAR, FL 33027

Title: P () Delete
Name: KNOWLES, THELMA B
Address: 17000 NW 67TH AVE.
City-St-Zip: MIAMI LAKES, FL 33015

Title: DD () Delete
Name: KNOWLES, NASHA
Address: 12957 SW 24TH STREET
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: KNOWLES, BERLISA
Address: 17000 NW 67TH AVE 331
City-St-Zip: MIAMI LAKES, FL 33015

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

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

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: THELMA B. KNOWLES

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date