

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31173

FILED
May 01, 2009
Secretary of State

Entity Name: SHEKINAH MINISTRIES, INCORPORATED

Current Principal Place of Business:

346 RUBEN MORGAN LN
HAVANA, FL 32333 US

New Principal Place of Business:

Current Mailing Address:

346 RUBEN MORGAN LN
HAVANA, FL 32333 US

New Mailing Address:

FEI Number: 59-2948219 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MORGAN, RUBEN D SR
346 RUBEN MORGAN LN
HAVANA, FL 32333 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: MORGAN, RUBEN
Address: 346 RUBEN MORGAN LN
City-St-Zip: HAVANA, FL 32333

Title: VD () Delete
Name: MORGAN, YVONNE
Address: 346 RUBEN MORGAN LN
City-St-Zip: HAVANA, FL 32333

Title: ST () Delete
Name: RITTER, CYNTHIA M
Address: 727 RICHWAY ROAD
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: BODISON, DAISY
Address: 1585 JAMIESON RD
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: BODISON, LESTER
Address: 1585 JAMIESON RD
City-St-Zip: HAVANA, FL 32333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: CYNTHIA RITTER

ST

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date