## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Mar 22, 2007 8:00 am Secretary of State

1. Entity Name DEREK PRINCE MINISTRIES, INTERNATIONAL, INC.					03-22-2007 90003 045 ******61.25					
Principal Place 3930 ROSE LA CHARLOTTE, M	AKE DR.	Mailing Address PO BOX 19501 CHARLOTTE, NC 2821	BOX 19501			40039530				
2. Principal Place of Business - No P.O. 8ox # 3. !		3. Mailing Address	i. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01112007 CH	ng-NP	CR2E037	(12/06)		
City & State		City & State			4. FEI Number 65-023184	5			plied For t Applicable	
Zip	Country	Zip Col		ntry	5. Certificate of Status Desired   \$8.75 Additional Fee Required					
	6. Name and Address of Current	Registered Agent		Name	7. Name and Add	ress of New R	egistered Ag	ent		
BUCK, GEOFFREY 3330 NW 69TH COURT FT LAUDERDALE, FL 33309				Street Address (P.O. Box Number is Not Acceptable)						
				City			FL	Zip Code	)	
	Signature, typed or printed name of registered agen Filling Fee is \$61.25 Due by May 1, 2007	and title if applicable. (NOT	mpaign F	~ —	\$5.00 May Be Added to Fees		DATE lake check p ida Departm			
10.	OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRE	CTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALONGI, JACK 11323 SIR FRANCES DRAKE D CHARLOTTE, NC 28277	RIVE		I .			[	] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SELBY, DAVID 10114 WHITEHORN DR. CHARLOTTE, NC 28277	☐ Delete		1			[	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DEVITO, MARK C 7336 MEADOWDALE LANE CHARLOTTE, NC 28212	Dalete		' I			[	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOEWY, ART 273 PROSPECT ST. FRAMINGHAM, MA 01701	☐ Delete	1	1			(	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FESPERMAN, SALLY 234 WATCHMAN LANE FRANKLIN, NC 28734	☐ Delete					(	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied wi	Delete	СПТА	EET ADDRESS - ST - ZIP	ad in Chapter 110. St	rido Ctotutos		Change	☐ Addition	

Thereby certify that the information supplied with this filing does not clualify for the exemptions contained 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 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 pytrustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all otherwise empowered.

SIGNATURE: ,