

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44950

FILED
Jan 19, 2009
Secretary of State

Entity Name: MORE THAN CONQUERORS MINISTRIES INC.

Current Principal Place of Business:

1901 CORAL RIDGE DR
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

1901 CORAL RIDGE DR
CORAL SPRINGS, FL 33071 US

New Mailing Address:

FEI Number: 65-0270929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SOUZA, ALDO L.
5242 NW 113TH AVENUE
CORAL SPRINGS, FL 33076 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: SOUZA, ALDO L.
Address: 5242 NW 113TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: T () Delete
Name: DA COSTA, LAURY,
Address: 3814 WOODFIELD DRIVE
City-St-Zip: CORAL SPRINGS, FL 33073

Title: S () Delete
Name: DA COSTA, ALEXANDRE,
Address: 7726 NW 25 ST
City-St-Zip: MARGATE, FL

Title: VD () Delete
Name: DA SILVA E SOUZA, VIVIANE
Address: 5242 NW 113TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33073

Title: AT () Delete
Name: COSTA, CARLA
Address: 7746 NW 25TH STREET
City-St-Zip: MARGATE, FL 33063

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: LAURY DA COSTA

T

01/19/2009

Electronic Signature of Signing Officer or Director

Date