2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2009
Secretary of State

DOCUMENT# N50840

Entity Name: DEERFIELD BEACH MINISTRIES, INC

Current Principal Place of Business:

160 SE 2ND STREET
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

160 SE 2ND STREET
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 59-2370066 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARTY, GASTON
6520 SW 7TH COURT
POMPANO BEACH, FL 33069 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: T ( ) Delete
Name: STRACHAN, ALPHONSO
Address: 1271 NE 39TH STREET
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete
Name: MULLINGS, MOSES
Address: 3696 VICTORIA RD
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete
Name: HAMILTON, SHEILA
Address: 200 NE 27TH AVE
City-St-Zip: BOYNTON BEACH, FL

Title: T ( ) Delete
Name: GESNER, JOESPH
Address: 4730 SW 13TH COURT
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T ( ) Delete
Name: WILFRED, STEWART
Address: 11605 NW 28TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D ( ) Delete
Name: CARTY, GASTON
Address: 6520 S.W. 7TH STREET
City-St-Zip: N. FT. LAUDERDALE, FL

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:

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: SHEILA HAMILTON D 02/28/2009

Electronic Signature of Signing Officer or Director — Date