

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000596

FILED
Apr 16, 2007
Secretary of State

Entity Name: RICH MOUNTAIN MINISTRIES, INC.

Current Principal Place of Business:

3000 N. ATLANTIC AVE
STE. #102
COCOA BEACH, FL 32931 US

New Principal Place of Business:

Current Mailing Address:

3000 N. ATLANTIC AVE
STE. 102
COCOA BEACH, FL 32931 US

New Mailing Address:

FEI Number: 59-3153840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAINTER, ALLEN F
3000 N. ATLANTIC AVE
STE. 102
COCOA BEACH, FL 32931 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: DP () Delete
Name: PAINTER, ALLEN F
Address: 3000 N. ATLANTIC AVE., STE. 102
City-St-Zip: COCOA BEACH, FL

Title: DV () Delete
Name: TROPEA, RAYMOND J
Address: 2770 PINE LILY LANE
City-St-Zip: COCOA, FL

Title: DS () Delete
Name: PAINTER, OLETTA JILL D
Address: 3000 N. ATLANTIC BLVD., STE. 102
City-St-Zip: COCOA BEACH, FL

Title: DT () Delete
Name: LEHTON, ROBERT E
Address: 3000 ATLANTIC AVE., STE. 102
City-St-Zip: COCOA BEACH, FL 32931

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALLEN F. PAINTER

DP

04/16/2007

Electronic Signature of Signing Officer or Director

Date