

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000806

FILED
May 21, 2009
Secretary of State

Entity Name: RADIANT LIFE INTERNATIONAL MINISTRIES INC.

Current Principal Place of Business:

10777 PEMBROKE RD
HOLLYWOOD, FL 33025 US

New Principal Place of Business:

2527 ANNAPOLIS WAY
NO 103
BRANDON, FL 33511 US

Current Mailing Address:

9220 HOLLY LAKE DR
201
HOLLYWOOD, FL 33025 US

New Mailing Address:

2527 ANNAPOLIS WAY
NO 103
BRANDON, FL 33511 US

FEI Number: 65-0379105 **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:

CUSHMAN, EARLE
9220 S HOLLY LAKE DR #201
HOLLYWOOD, FL 33025 US

Name and Address of New Registered Agent:

CUSHMAN, EARLE
2527 ANNAPOLIS WAY
NO 103
BRANDON, FL 33511 US

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: EL

05/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CUSHMAN, EARLE
Address: P.O. BOX 5250 N/A
City-St-Zip: LIGHTHOUSE PT., FL 33074

Title: D () Delete
Name: MAYO, NELSON
Address: 618 VIRGINIA WOOD LANE
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: CUSHMAN, DEBRA
Address: 176 S. MILLER RD.
City-St-Zip: AKRON, OH 49333

Title: T () Delete
Name: YEAM, DANIEL
Address: 5221 ALMONTE AVE.
City-St-Zip: TEMPLE CITY, CA 91780

Title: T () Delete
Name: SHIN, DAVID
Address: 708 DEMOTT CT
City-St-Zip: WESTWAY, NY 11590

Title: T () Delete
Name: SOLOMON, MICHAEL
Address: 300 KING BRIDGE ST
City-St-Zip: DEERFIELD BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CUSHMAN, EARLE
Address: 2527 ANNAPOLIS WAY
City-St-Zip: BRANDON, FL 33511

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: EARLE CUSHMAN

P

05/21/2009

Electronic Signature of Signing Officer or Director

Date