

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001092

FILED
Apr 23, 2007
Secretary of State

Entity Name: OLIVE BRANCH INTERNATIONAL, INC.

Current Principal Place of Business:

2921 ST. ANDREWS DRIVE
FINDLAY, OH 45840 US

New Principal Place of Business:

Current Mailing Address:

2921 ST. ANDREWS DRIVE
FINDLAY, OH 45840 US

New Mailing Address:

FEI Number: 59-3173389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNKLE, ROBERT A
1057 ST JOHNS BLUFF ROAD N
JACKSONVILLE, FL 32225 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: DICKENS, BOBBY
Address: PO BOX 427
City-St-Zip: BELIZE CITY, BELIZE,

Title: STD () Delete
Name: DICKENS, DENISE
Address: PO BOX 427
City-St-Zip: BELIZE CITY, BELIZE,

Title: VD () Delete
Name: MILLER, D. RAY
Address: 7002 ROAD 5-F
City-St-Zip: LEIPSIC, OH

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DICKENS, BOBBY
Address: PO BOX 198
City-St-Zip: BELIZE CITY, BELIZE, CA CNTRL AM

Title: STD (X) Change () Addition
Name: DICKENS, DENISE
Address: PO BOX 198
City-St-Zip: BELIZE CITY, BELIZE, CA CNTRL AM

Title: VD (X) Change () Addition
Name: MILLER, D. RAY
Address: 7002 ROAD 5-F
City-St-Zip: LEIPSIC, OH 45856

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: D RAY MILLER

VD

04/23/2007

Electronic Signature of Signing Officer or Director

_____ Date