

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003185

FILED  
May 02, 2008  
Secretary of State

**Entity Name:** TRUE LIFE INTERNATIONAL HEALING MINISTRIES, INC.

**Current Principal Place of Business:**

8307 N.W. 22ND AVENUE  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

8307 N.W. 22ND AVENUE  
MIAMI, FL 33147

**New Mailing Address:**

**FEI Number:** 65-0535669 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
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:**

GRAHAM, VERONICA  
1790 N.W. 82ND STREET  
MIAMI, FL 33147 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: D ( ) Delete  
Name: GRAHAM, VERONICA  
Address: 1790 N.W. 82ND STREET  
City-St-Zip: MIAMI, FL 33147

Title: D ( ) Delete  
Name: ROLLE, PHILLIP  
Address: 1260 NW 95TH ST.  
City-St-Zip: MIAMI, FL 33147

Title: D ( ) Delete  
Name: MILLER, ROOSEVELT  
Address: 2215 NW 97TH ST.  
City-St-Zip: MIAMI, FL 33147

Title: DT ( ) Delete  
Name: MILLER, BERTHA  
Address: 2215 NW 97TH ST.  
City-St-Zip: MIAMI, FL 33147

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BURKES, LAWRENCE  
Address: 2160 NW 81 TER  
City-St-Zip: MIAMI, FL 33147

Title: D (X) Change ( ) Addition  
Name: WHILEY, JAMES  
Address: 183 OLDE TOWN RD.  
City-St-Zip: NEW PORT, VA 23608

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: DONYSHA, BURROWES  
Address: 15971 N.E. 19TH CT.  
City-St-Zip: NORTH MIAMI BCH., FL 33162

Title: D ( ) Change (X) Addition  
Name: ADRIAN, BURROWES  
Address: 15971 N.E. 19TH CT.  
City-St-Zip: NORTH MIAMI, BCH., FL 33162

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: VERONICA GRAHAM

P

05/02/2008

Electronic Signature of Signing Officer or Director

Date