

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000575

FILED
Mar 05, 2009
Secretary of State

Entity Name: NADIA'S LIGHT AND HELP MINISTRIES, INC.

Current Principal Place of Business:

MANSOURIA INSTITUTE
MANSOURIA
LEBANON,

New Principal Place of Business:

MANSOURIA INSTITUTE
MANSOURIA
LEBANON, XX

Current Mailing Address:

1128 ROYAL PALM BEACH BLVD
#136
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 65-0664006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWAND, NADIA A
1128 ROYAL PALM BEACH BLVD., #136
ROYAL PALM BEACH, FL 33411 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: LAWAND, NADIA A
Address: 1128 ROYAL PALM BEACH BLVD., #136
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: OD () Delete
Name: MOORE, ROY
Address: P.O. BOX 367 N/A
City-St-Zip: WASHINGTON, NC 27889

Title: SD () Delete
Name: LAWAND, TANYA C
Address: 13440 NORTH 44TH STREET
City-St-Zip: PHOENIX, AZ 85032

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:

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: NADIA LAWAND

PD

03/05/2009

Electronic Signature of Signing Officer or Director

Date