

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000910

FILED
Mar 05, 2009
Secretary of State

Entity Name: INTERNATIONAL INTERCESSORS' OF THE BODY OF CHRIST MINISTRIES, INC.

Current Principal Place of Business:

10537 ASHBY ROAD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

10537 ASHBY ROAD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 65-0671799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, EVELYN
4762 NW 168 TERR
MIAMI, FL 33055 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: TD () Delete
Name: COOPER, EVELYN
Address: 4762 NW 168 TERR
City-St-Zip: CAROL CITY, FL 33055

Title: TS () Delete
Name: MYERS, YIRAYMA
Address: 4371 W 10 LN
City-St-Zip: HIALEAH, FL 33012

Title: TVP () Delete
Name: MYERS, MICHAEL
Address: 4767 NW 168 TERR
City-St-Zip: CAROL CITY, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: COOPER, EVELYN
Address: 10537 ASHBY RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: TS (X) Change () Addition
Name: MYERS, YIRAYMA
Address: 2336 BROWARD RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: TVP (X) Change () Addition
Name: MYERS, MICHAEL
Address: 2336 BROWARD RD
City-St-Zip: JACKSONVILLE, FL 32218

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: EVELYN COOPER

TD

03/05/2009

Electronic Signature of Signing Officer or Director

Date