## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000001971

City-St-Zip: LAKELAND, FL 33801

FILED Apr 23, 2007 Secretary of State

Entity Name: GOD'S REFUGE MINISTRIES, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1014 MLK BLVD SEFFNER, FL 33584						
Current Mailing Address:			New Mailii	ng Address:		
PO BOX 3732 BRANDON, FL 335093752						
FEI Number:	59-3392715	FEI Number Applied For ( )	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
	CHRISTINE MILL ROAD , FL 33510	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:						
	Electron	ic Signature of Registered Agen	t	Date		
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	V () HOWARD, ZENG 3304 BALLAST TAMPA, FL 336	PT BLVD	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition HOWARD, ZENOLA 2006 PLANATION KEY CIRCLE #201 BRANDON, FL 33511		
Title: Name: Address: City-St-Zip:	FS () RAIFORD, TANO 3808 HIGHLAND VALRICO, FL 3	GATE DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () BOYETTE, TIMO 1923 SAWMILL BRANDON, FL	ROAD	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BOYETTE, TIMOTHY 1923 SAWMILL ROAD BRANDON, FL 33510		
Title: Name: Address: City-St-Zip:	D () LIGHTSEY, DAN 324 W WELLING LAKELAND, FL	GTON DR	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition SHANKIRA CLARK, 2860 YONKERS COURTS OVIEDO, FL 32765		
Title: Name: Address:	REDDICK, WAL	Delete TER JR GROVE DR APT #99	Title: Name: Address:	() Change () Addition		

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.

City-St-Zip:

SIGNATURE: CHRISTINE BOYETTE PAST 04/23/2007