

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002329

FILED
Feb 18, 2010
Secretary of State

Entity Name: TOTAL TRANSFORMATION MINISTRIES, INC.

Current Principal Place of Business:

1467 W. 23RD ST.
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

4422 WILL SCARLET RD
JACKSONVILLE, FL 32208 US

New Mailing Address:

FEI Number: 59-3376980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANE, BARBARA A REV.
4422 WILL SCARLET RD
JACKSONVILLE, FL 32208 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
Name: LANE, BARBARA A REV.
Address: 4422 WILL SCARLET ROAD
City-St-Zip: JACKSONVILLE, FL 32208

Title: D
Name: GIBBS, MARY LOU REV.
Address: 3330 N. LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D
Name: ADAMS, JEAN REV.
Address: 5612 HOLLIN HEAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: GIVENS, EVERETT JR.
Address: 223 SAMUEL ST.
City-St-Zip: DAVENPORT, FL 33297

Title: D
Name: LANE, MARCUS
Address: 4422 WILL SCARLET RD.
City-St-Zip: JACKSONVILLE, FL 32208

Title: D
Name: LITTLES, DIANE
Address: 7118 RUSSELL ST.
City-St-Zip: JACKSONVILLE, FL 32208

I hereby 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 all other like empowered.

SIGNATURE: BARBARA A. LANE

REV.

02/18/2010

Electronic Signature of Signing Officer or Director

Date