2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002329

FILED May 07, 2012 Secretary of State

Entity Name: TOTAL TRANSFORMATION MINISTRIES, INC.

US

Current Principal Place of Business: New Principal Place of Business:

1467 W. 23RD ST. JACKSONVILLE, FL 32208

Current Mailing Address: New Mailing Address:

4422 WILL SCARLET RD JACKSONVILLE, FL 32208 US

FEI Number: 59-3376980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANE, BARBARA A REV. 4422 WILL SCARLET RD JACKSONVILLE, FL 32208

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:

 Name:
 ADAMS, JEAN REV.

 Address:
 5612 HOLLIN HEAD

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title:

Name: GIVENS, EVERETT JR.
Address: 4422 WILL SCARLET RD.
City-St-Zip: JACKSONVILLE, FL 32208

Title:

 Name:
 LANE, MARCUS

 Address:
 4422 WILL SCARLET RD.

 City-St-Zip:
 JACKSONVILLE, FL 32208

Title: [

 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 LANE REV. 05/07/2012