2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N96000003572

Entity Name: RAPHA MINISTRIES, INC.

Current Principal Place of Business:

100-A HART ST
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 181
NICEVILLE, FL 32588

New Mailing Address:

FEI Number: 59-3405506 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACK MOTT
100-A HART ST
NICEVILLE, FL 32578 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: DP ( ) Delete
Name: MOTT, JACK C JR
Address: 218 GRANDVIEW AVE
City-St-Zip: VALPARAISO, FL 32580

Title: D ( ) Delete
Name: PHILLIPS, ROBERT
Address: 1007 FOREST RD
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete
Name: JERNIGAN, JACKIE
Address: 7 DOGWOOD DR
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete
Name: MATHERS, ROBERT
Address: 1200 WINDWARD CIRCLE
City-St-Zip: NICEVILLE, FL 32578

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SEC ( ) Change (X) Addition
Name: MOTT, DENIESE
Address: 218 GRANDVIEW AVENUE
City-St-Zip: VALPARAISO, FL 32580 US

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: JACK C MOTT JR PRES 04/23/2009

Electronic Signature of Signing Officer or Director — Date