

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004098

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** SPIRITUAL WARRIORS FOR CHRIST, INC.

**Current Principal Place of Business:**

20613 S.W. 119 PLACE  
MIAMI, FL 33177 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 970242  
MIAMI, FL 33197 US

**New Mailing Address:**

**FEI Number:** 65-0686947 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

TAYLOR, MARTHA  
20613 S.W. 119 PLACE  
MIAMI, FL 33177 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: TAYLOR, MARTHA  
Address: 20613 SW 119 PL  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: TAYLOR, QUEEN  
Address: 26515 SW 138TH AVE  
City-St-Zip: HOMESTEAD, FL 33032

Title: D (X) Delete  
Name: ZELLNER, TIFFANY  
Address: 20613 SW 119 PL  
City-St-Zip: MIAMI, FL 33177

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: ZELLNER, TIFFANY  
Address: 20613 SW 119 PL  
City-St-Zip: MIAMI, FL 33177

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

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: MARTHA TAYLOR

DT

05/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date