

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004098

FILED
May 01, 2009
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:

PO BOX 972017
MIAMI, FL 33197 US

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: ZELLNER, TIFFANY
Address: 20613 SW 119 PL
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: TAYLOR-LOVE, MARTHA O
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-LOVE

DT

05/01/2009

Electronic Signature of Signing Officer or Director

Date