

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005488

FILED
Apr 19, 2009
Secretary of State

Entity Name: SPIRITUAL DEVELOPMENT INTERNATIONAL, INC.

Current Principal Place of Business:

931 NORTH SHORE DRIVE
EUSTIS, FL 327262839 US

New Principal Place of Business:

931 NORTSHORE DRIVE
EUSTIS, FL 327262839 US

Current Mailing Address:

931 NORTH SHORE DRIVE
EUSTIS, FL 327262839 US

New Mailing Address:

931 NORTSHORE DRIVE
EUSTIS, FL 327262839 US

FEI Number: 59-3410065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COVINGTON, CHARYSSE S
1211 S. CENTER STREET
EUSTIS, FL 32726 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: P () Delete
Name: COVINGTON, CHARYSSE S
Address: 1211 S. CENTER STREET
City-St-Zip: EUSTIS, FL 32726

Title: VP () Delete
Name: BOND, LORRAINE
Address: 1706 LAKEVIEW COURT
City-St-Zip: EUSTIS, FL 32726

Title: D () Delete
Name: HAKANSON, KENNETH
Address: 2470 E. CROOKED LAKE CLUB BLVD.
City-St-Zip: EUSTIS, FL 32726

Title: D () Delete
Name: WHEELER, BETH
Address: 133 HEATHER OAKS CIRCLE
City-St-Zip: LADY LAKE, FL 32159 OC

Title: D () Delete
Name: BARTON, GEORGE C
Address: 829 NO. SHORE DR
City-St-Zip: EUSTIS, FL 327262819

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: D (X) Change () Addition
Name: BARTON, GEORGE C
Address: 829 NOTSHORE DR
City-St-Zip: EUSTIS, FL 327262819

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: CHARYSSE S. COVINGTON

P

04/19/2009

Electronic Signature of Signing Officer or Director

Date