2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000452

FILED Apr 02, 2008 Secretary of State

Entity Name: JONATHAN SETTEL INTERNATIONAL MINISTRIES, INC.

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

4420 OASIS PLAINS AVENUE 10875 N. W. 80TH CIRCLE NORTH LAS VEGAS, NV 89085 PARKLAND, FL 33076

Current Mailing Address: New Mailing Address:

13935-A NESTING WAY P. O. BOX 7988

COURT G DELRAY BEACH, FL 33484 DELRAY BEACH, FL 33484

FEI Number: 65-0751932 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:

MARTIN, ROSE M

13935-A NESTING WAY

COURT G

DELRAY BEACH, FL 33484 US

SETTEL, SHARON S

10875 N. W. 80TH CIRCLE

PARKLAND, FL 33076 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: SHARON S. SETTEL 04/02/2008

Electronic Signature of Registered Agent Date

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

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 SETTEL, JONATHAN
 Name:
 SETTEL, JONATHAN

 Address:
 4420 OASIS PLAINS AVENUE
 Address:
 10875 N. W. 80TH CIRCLE

 City-St-Zip:
 NORTH LAS VEGAS, NV 89085
 City-St-Zip:
 PARKLAND, FL 33076

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 SETTEL, SHARON
 Name:
 SETTEL, SHARON

 Address:
 4420 OASIS PLAINS AVENUE
 Address:
 10875 N. W. 80TH CIRCLE

 City-St-Zip:
 NORTH LAS VEGAS, NV 89085
 City-St-Zip:
 PARKLAND, FL 33076

Title: D () Delete Title: () Change () Addition

 Name:
 LANZA, DR. FRANK
 Name:

 Address:
 10900 KENWOOD DR.
 Address:

 City-St-Zip:
 HOUSTON, TX 77024
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LANZA, ALICE
 Name:

 Address:
 10900 KENWOOD DRIVE
 Address:

 City-St-Zip:
 HOUSTON, TX 77024
 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: SHARON S. SETTEL VD 04/02/2008