2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# N97000001291

Entity Name: SANCTUARY OF REFUGE PRAYER MISSSION, INC.

Current Principal Place of Business:

2955 NW 54 STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 680553
MIAMI, FL 33168

New Mailing Address:

FEI Number: 65-0734666 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PD ( ) Delete
Name: ROLLE, ELDER GLENN A
Address: 12300 NORTHWEST 2 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: V ( ) Delete
Name: RIVERS, IMANI
Address: 12300 NORTHWEST 2 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: STD ( ) Delete
Name: ROLLE, EVANG PAULETTE K
Address: 12300 NORTHWEST 2 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: D ( ) Delete
Name: LEWIS, LOUISE
Address: 8255 NW MIAMI CY #417
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ROLLE, ELDER GLENN A
Address: 7711 NW 7 STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: V (X) Change ( ) Addition
Name: RIVERS, IMANI
Address: 2438 OLYMPIA AVE
City-St-Zip: TULSA, OK 74017

Title: STD (X) Change ( ) Addition
Name: ROLLE, EVANG PAULETTE K
Address: 7711 NW 7 STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D (X) Change ( ) Addition
Name: LEWIS, LOUISE
Address: 8255 NW MIAMI CT #417
City-St-Zip: MIAMI, FL 33150

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: /S/ PAULETTE K. ROLLE STD 04/22/2008

Electronic Signature of Signing Officer or Director — Date