

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002532

FILED
Apr 28, 2008
Secretary of State

Entity Name: RESURRECTION LIFE MINISTRIES, INC.

Current Principal Place of Business:

420 E PINE
CRESTVIEW, FL 32539

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 593
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 56-3465773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATSON, THOMAS M
5807 HILARY STREET
CRESTVIEW, FL 32539 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: HAGEDORN, MIA
Address: 5202 BROOKWOOD LN
City-St-Zip: CRESTVIEW, FL 32539

Title: TD () Delete
Name: DAWSON, GAIL
Address: 420 E PINE
City-St-Zip: CRESTVIEW, FL 32539

Title: D () Delete
Name: DEES, ROBERT
Address: 420 E PINE
City-St-Zip: CRESTVIEW, FL 32539

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: HAGEDORN, MIA
Address: 5202 BROOKWOOD LN
City-St-Zip: CRESTVIEW, FL 32539

Title: PD (X) Change () Addition
Name: BATSON, THOMAS M
Address: 420 E PINE
City-St-Zip: CRESTVIEW, FL 32539

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: TOMMY BATSON

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date