

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004311

FILED
Feb 01, 2007
Secretary of State

Entity Name: LINDA MARKOWITZ MINISTRIES, INC.

Current Principal Place of Business:

1308 PLEASANT OAK LN.
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1899
APOPKA, FL 32704 US

New Mailing Address:

FEI Number: 59-3461478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKOWITZ, LEE D
1308 PLEASANT OAK LANE
ORLANDO, FL 32804 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: POD () Delete
Name: MARKOWITZ, LINDA
Address: 1308 PLEASANT OAK LN.
City-St-Zip: ORLANDO, FL 32804

Title: STD () Delete
Name: MARKOWITZ, LEE D
Address: 1308 PLEASANT OAK LN
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: WISECUP, DEB
Address: 807 LEANORE DRIVE
City-St-Zip: APOPKA, FL 32712

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: LEE D. MARKOWITZ

STD

02/01/2007

Electronic Signature of Signing Officer or Director

Date