

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000077

FILED
Mar 20, 2009
Secretary of State

Entity Name: LIFT HIGH THE CROSS MINISTRY, INC.

Current Principal Place of Business:

7601 SW 39TH ST
DAVIE, FL 333282716

New Principal Place of Business:

Current Mailing Address:

7601 SW 39TH ST
DAVIE, FL 333282716

New Mailing Address:

FEI Number: 65-0819217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGRAHAM, ROBERT
14175 ICOT BLVD.
STE. 100
CLEARWATER, FL 33760 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: STUHRENBERG, DARRELL
Address: 7601 SW 39TH AVENUE
City-St-Zip: DAVIE, FL 33326

Title: ST () Delete
Name: MELIN, PAUL
Address: 3425 CRESENT AVE.
City-St-Zip: FT. WAYNE, IN 46805

Title: MGR () Delete
Name: MASON, JAY S REV
Address: 6204 LA JOYA PL. NW
City-St-Zip: ALBUQUERQUE, NM 87120

Title: D () Delete
Name: FREUNDT, KARL
Address: 2223 SW PONDVIEW DR.
City-St-Zip: TOPEKA, KA 66614

Title: D () Delete
Name: MENKE, JAMES REV
Address: 2603 COTTINGTON CIR NW
City-St-Zip: NORTH CANTON, OH 49720

Title: D () Delete
Name: SCHROEDER, KEN
Address: PMB 333-2304 W BROADWAY BLVD
City-St-Zip: SEDALIA, MO 65301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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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 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: REV JAY MASON

MGR

03/20/2009

Electronic Signature of Signing Officer or Director

Date