

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000171

FILED
Apr 13, 2011
Secretary of State

Entity Name: ELIJAH'S CUP OF MERCY INTERNATIONAL, INC.

Current Principal Place of Business:

1693 IMPERIAL PALM DRIVE
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 915168
LONGWOOD, FL 327915168 US

New Mailing Address:

FEI Number: 59-3484305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPCHUK, OXANA
1693 IMPERIAL PALM DR
APOPKA, FL 32712 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
Name: MORIAH, MIRI
Address: PO BOX 692
City-St-Zip: TIBERIAS ISRAEL, UK 14106 UK

Title: VD
Name: MORIAH-TIMSIT, YAEL
Address: PO BOX 692
City-St-Zip: TIBERIAS ISRAEL, UK 14106 UK

Title: SD
Name: LAPCHUK, OXANA
Address: 1693 IMPERIAL PALM DR
City-St-Zip: APOPKA, FL 32712 US

Title: TD
Name: SEEFELDT, MELINDA
Address: 3206 SE ASTER LANE, #R-106
City-St-Zip: STUART, FL 34994 US

Title: D
Name: RUMLEY, GENE
Address: 539 WEKIWA CREST CT
City-St-Zip: APOPKA, FL 32712

Title: D
Name: RUMLEY, ARLENE
Address: 539 WEKIWA CREST CT
City-St-Zip: APOPKA, FL 32712

I hereby 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 all other like empowered.

SIGNATURE: OXANA LAPCHUK

SD

04/13/2011

Electronic Signature of Signing Officer or Director

Date