

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000465

FILED
May 01, 2007
Secretary of State

Entity Name: GREATER LIFE FELLOWSHIP MINISTRY, INC.

Current Principal Place of Business:

1445 NORTH MANGONIA DRIVE
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1445 NORTH MANGONIA DRIVE
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CAMERON, DAMONE L
1445 NORTH MANGONIA DRIVE
WEST PALM BEACH, FL 33401 US

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: DVP () Delete
Name: HICKMAN, LINDA
Address: 1445 NORTH MANGONIA DR
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DP () Delete
Name: CAMERON, DAMONE
Address: 2201 AVE F
City-St-Zip: RIVERA BCH, FL 33404

Title: S () Delete
Name: CAMERON, BRIDGETTE
Address: 2201 AVE F
City-St-Zip: RIVIERA BCH, FL

Title: T () Delete
Name: DARLING, SALLY C
Address: 1837 HILTONIA DR
City-St-Zip: WPB, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change () Addition
Name: CAMERON, DAMONE L
Address: 2201 AVE F
City-St-Zip: RIVERA BCH, FL 33404

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: DAMONE L. CAMERON

DP

05/01/2007

Electronic Signature of Signing Officer or Director

Date