

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000465

FILED
Mar 15, 2008
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: 65-0909433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

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

Title: DVP (X) Change () Addition
Name: CAMERON, DARYL L
Address: 1445 NORTH MANGONIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S (X) Change () Addition
Name: CAMERON, BRIDGETTE
Address: 2201 AVE F
City-St-Zip: RIVIERA BCH, FL 33404

Title: T (X) Change () Addition
Name: DARLING, SALLY C
Address: 1837 HILTONIA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33407

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

03/15/2008

Electronic Signature of Signing Officer or Director

Date