

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001669

FILED
May 16, 2009
Secretary of State

Entity Name: LATTER RAIN CHURCH OF JESUS CHRIST APOSTOLIC INC.

Current Principal Place of Business:

4102 N. PINEHILLS ROAD
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4102 N. PINEHILLS ROAD
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 23-2402035 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

McFARLANE-BROWN, DOREEN
725 ALFRED DRIVE
ORLANDO, FL 32810 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: PD () Delete
Name: BROWN, KENERY
Address: 725 ALFRED DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: MCFARLANE-BROWN, DOREEN
Address: 725 ALFRED DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: VP () Delete
Name: GAINEY, CORINE
Address: 3017 CUMLER COURT
City-St-Zip: ORLANDO, FL 32811

Title: O () Delete
Name: MCKENZIE, LURLEEN
Address: 5328 GODDARD AVENUE
City-St-Zip: ORLANDO, FL 32810

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:

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: BROWN KENERY

PD

05/16/2009

Electronic Signature of Signing Officer or Director

Date