

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003014

FILED
Mar 27, 2009
Secretary of State

Entity Name: FLAMING FIRE DELIVERANCE MINISTRY, INC.

Current Principal Place of Business:

1141 BECKNER AVENUE
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

5420 OLD KINGS RD
JACKSONVILLE, FL 322541156

New Mailing Address:

FEI Number: 59-3551703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, LEROY SR.
P.O. BOX 26346
5420 OLD KINGS RD
JACKSONVILLE, FL 322541156 US

Name and Address of New Registered Agent:

ROBINSON, LEROY SR.
5420 OLD KINGS RD.
JACKSONVILLE, FL 322541156 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:

03/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: ROBINSON, LEROY SR.
Address: 1141 BECKNER AVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD () Delete
Name: GREEN, MISHALLE
Address: 1214 LABELLE STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: MD () Delete
Name: ROBINSON, ANNIE S
Address: 1141 BECKNER AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

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:

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: LEROY ROBINSON SR.

PD

03/27/2009

Electronic Signature of Signing Officer or Director

Date