

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002706

FILED
Apr 27, 2009
Secretary of State

Entity Name: SOUL WINNERS INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

16821 ALPHA AVENUE
MONTVERDE, FL 34756

New Principal Place of Business:

Current Mailing Address:

PO BOX 560444
MONTVERDE, FL 34756

New Mailing Address:

FEI Number: 59-3574509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUNDERS, MARK W
16821 ALPHA AVENUE
MONTVERDE, FL 34756 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 () Delete
Name: SAUNDERS, MARK W
Address: 16821 ALPHA AVENUE
City-St-Zip: MONTVERDE, FL 34756

Title: D () Delete
Name: SAUNDERS, KIMBERLEE
Address: 16821 ALPHA AVENUE
City-St-Zip: MONTVERDE, FL 34756

Title: D () Delete
Name: LANSING, MARIE JO
Address: 1218 OVERLAKE AVE
City-St-Zip: ORLANDO, FL 32806

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: MARK SAUNDERS

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date