

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005915

FILED
Apr 09, 2009
Secretary of State

Entity Name: TRIUMPHANT LIFE MINISTRIES, INC.

Current Principal Place of Business:

221 SW 70TH AVE
PEMBROKE PINES, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

221 SW 70TH AVE
PEMBROKE PINES, FL 33023 US

New Mailing Address:

FEI Number: 65-0951081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRY, VINDEL
221 SW 70TH AVE
PEMBROKE PINES, FL 33023 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: HENRY, VINDEL
Address: 221 SW 70TH AVE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: D () Delete
Name: ASIAMIGBE, MARY ANN
Address: 1683 NW 60TH AVENUE, APT C
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: HENRY, LANSLEY
Address: 221 SW 70 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: T () Delete
Name: MCEWAN, LAUNA
Address: 1031 NW 182ND STREET
City-St-Zip: MIAMI, FL 333169

Title: S () Delete
Name: TAYLOR, MERCELLA
Address: 2090 NE 168TH STREET, APT 1
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BRIM, JANICE
Address: 7121 SW 15TH STREET
City-St-Zip: PEMBROKE PINES, FL 33023

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: VINDEL HENRY

PD

04/09/2009

Electronic Signature of Signing Officer or Director

Date