

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006573

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** RESTORATION OF LIFE MINISTRIES INTERNATIONAL, INCORPORATED

**Current Principal Place of Business:**

2708 N AUSTRALIAN AVENUE  
#1  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

844 RYANWOOD DRIVE  
WEST PALM BEACH, FL 33413

**Current Mailing Address:**

P.O. BOX 1911  
WEST PALM BEACH, FL 334021911

**New Mailing Address:**

P.O. BOX 1911  
WEST PALM BEACH, FL 33402

FEI Number: 65-0956630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STUBBS, VALENCIA REV.  
844 RYANWOOD DRIVE  
WEST PALM BEACH, FL 33413 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: D ( ) Delete  
Name: STUBBS, STEPHEN A BISHOP  
Address: 844 RYANWOOD DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D ( ) Delete  
Name: STUBBS, VALENCIA REV  
Address: 844 RYANWOOD DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D ( ) Delete  
Name: SLEDGE, PHILLIP REV  
Address: 1117 W 32ND STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D ( ) Delete  
Name: GRANT, TRACEY L SEC  
Address: 3526 WHITEHALL DRIVE #205  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete  
Name: GALLON, ARCHIE  
Address: 104 DIANNA DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32114

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: SLEDGE, PHILLIP REV  
Address: 1333 33RD STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

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: STEPHEN A STUBBS

D

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date