

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33281

FILED
Apr 16, 2009
Secretary of State

Entity Name: PASADENA INSTITUTE OF DIVINE METAPHYSICAL RESEARCH, INC.

Current Principal Place of Business:

320 10TH STREET
SUITE A
HOLLY HILL, FL 32117

New Principal Place of Business:

Current Mailing Address:

320 10TH STREET
SUITE A
HOLLY HILL, FL 32117

New Mailing Address:

FEI Number: 95-3675774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, JOSEPH
1330 STATE AVE
HOLLY HILL, FL 32117 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: BELL, JOSEPH
Address: 1330 STATE AVE
City-St-Zip: HOLLY HILL, FL 32117

Title: VD () Delete
Name: ARIAS, MICHAEL
Address: 249 MANHATTAN WAY
City-St-Zip: PORT ORANGE, FL 32119

Title: STD () Delete
Name: IRVIS, LISA
Address: 922 MAY AVENUE
City-St-Zip: HOLLY HILL, FL 32117

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: JOSEPH BELL, SR.

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date