

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32252

FILED
Apr 26, 2007
Secretary of State

Entity Name: SEVENTH DAY ADVENTIST REFORM MOVEMENT, SOUTH EAST U.S. FIELD CORPORATION

Current Principal Place of Business:

1343 OLD HICKORY BLVD.
NASHVILLE, TN 37207 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 759
CITRA, FL 32113 US

New Mailing Address:

FEI Number: 62-1407121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEAN-FRANCOIS, JACQUES P
9127 SE 225TH DR.
HAWTHORNE, FL 32640 US

Name and Address of New Registered Agent:

DUCHEINE, MICHEL-ANGE F
1452 E MOWRY DR
APT 203
HOMESTEAD, FL 33033 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: MICHEL-ANGE F. DUCHEINE

04/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUMITRU, DORIVAL
Address: 1345 GOOD MORNING DR.
City-St-Zip: NASHVILLE, TN 37072

Title: V () Delete
Name: JEAN-FRANCOIS, JACQUES P
Address: 9127 S.E. 225TH DRIVE
City-St-Zip: HAWTHORNE, FL 32640

Title: T () Delete
Name: GRIMALDI, JEFFREY
Address: 3630 KENYON RD.
City-St-Zip: PARROTTSVILLE, TN 37843 US

Title: S () Delete
Name: MONTROSE, BARBARA
Address: P. O. BOX 192
City-St-Zip: CLOVERDALE, VA 24077 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: DUCHEINE, MICHEL-ANGE F
Address: 1452 E MOWRY DR APT 203
City-St-Zip: HOMESTEAD, FL 33033 US

Title: T (X) Change () Addition
Name: MARYANN, ESTEVEZ
Address: 4000 ORXBURY LANE APT C
City-St-Zip: ROANOKE, VA 24018 US

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: MICHEL-ANGE F. DUCHEINE

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04/26/2007

Electronic Signature of Signing Officer or Director

Date