

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719795

FILED
Jan 21, 2009
Secretary of State

Entity Name: THE BODY OF CHRIST MINISTRIES, INC.

Current Principal Place of Business:

C/O DR. F.B. SEGHERS
1214 MORVENWOOD RD.
JACKSONVILLE, FL 322075364

New Principal Place of Business:

Current Mailing Address:

C/O DR. F.B. SEGHERS
1214 MORVENWOOD RD.
JACKSONVILLE, FL 322075364

New Mailing Address:

FEI Number: 59-1401103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEGHERS, FRANK B DR
1214 MORVENWOOD RD
JACKSONVILLE, FL 322075364 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: VSD () Delete
Name: SEGHERS, BARBARA S MRS
Address: 1214 MORVENWOOD RD
City-St-Zip: JACKSONVILLE, FL 322075364 US

Title: PTD () Delete
Name: SEGHERS, FRANK B DR
Address: 1214 MORVENWOOD RD
City-St-Zip: JACKSONVILLE, FL 322075364 US

Title: D () Delete
Name: JOHNSON, WILLIAM R MR
Address: 4422 HERSCHEL ST.
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: D () Change (X) Addition
Name: SEGHERS, JEREMY F MR
Address: 1515 CATHERINE ST., UNIT 2
City-St-Zip: ORLANDO, FL 32801

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: DR. FRANK B. SEGHERS, JR.

PTD

01/21/2009

Electronic Signature of Signing Officer or Director

Date