

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739336

FILED
Sep 08, 2006
Secretary of State

Entity Name: DAYSPRING CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

7169 CONANT AVE
PO BOX 7036
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

7169 CONANT AVE
PO BOX 7036
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 59-1768964 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

YODER, ALLEN J.
2462 VIOLA STREET
MIDDLEBURG, FL 32068 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: YODER, ALLEN J.,
Address: 2462 VIOLA STREET
City-St-Zip: MIDDLEBURG, FL 32068

Title: VD () Delete
Name: KOZLOSKI, MICHAEL,
Address: 5627 COLUMBIA PL
City-St-Zip: JACKSONVILLE, FL

Title: SD () Delete
Name: YODER, CLARA,
Address: 2462 VIOLA STREET
City-St-Zip: MIDDLEBURG, FL 32068

Title: T () Delete
Name: BALCAR, JEANEVA F.,
Address: 10264 OLD PLANK RD
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: CILLIAC, VITAL
Address: 968 HIBERNIA FOREST DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: () 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 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: ALLEN J. YODER

PD

09/08/2006

Electronic Signature of Signing Officer or Director

Date