

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754400

FILED
Jan 08, 2007
Secretary of State

Entity Name: MINISTERIAL FELLOWSHIP OF THE GULF COAST, INC.

Current Principal Place of Business:

5316 53RD AVE. EAST (F-45)
BRADENTON, FL 34203 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9771
BRADENTON, FL 34206 US

New Mailing Address:

P.O. BOX 21136
BRADENTON, FL 34204 US

FEI Number: 59-2372678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERSON, WILLIAM REV
5316 53RD AVE. EAST (F-45)
BRADENTON, FL 34203 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: PIERSON, WILLIAM REV
Address: 5316 53RD AVE E F-45
City-St-Zip: BRADENTON, FL 34203

Title: VD () Delete
Name: SLABAUGH, KENTON REV
Address: 5614 RICHARDSON RD.
City-St-Zip: SARASOTA, FL 34232

Title: SD () Delete
Name: ROSHAVEN, HOWARD REV
Address: 1040 LIGHTFOOT RD.
City-St-Zip: WIMUMA, FL 33598

Title: TD () Delete
Name: GLENNEY, LOLA A REV
Address: 1600 1ST AVE. WEST, #304A
City-St-Zip: BRADENTON, FL 34205

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:

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: REV. LOLA A. GLENNEY

TD

01/08/2007

Electronic Signature of Signing Officer or Director

Date