

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754597

FILED
May 07, 2010
Secretary of State

Entity Name: PACE ASSEMBLY MINISTRIES, INC.

Current Principal Place of Business:

%JOSEPH ROGERS
3948 HWY 90
PACE, FL 325718998

New Principal Place of Business:

Current Mailing Address:

%TAMMY DAVIS
3948 HWY 90
PACE, FL 325718998

New Mailing Address:

%JOSEPH ROGERS
3948 HWY 90
PACE, FL 325718998

FEI Number: 59-1944606 **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:

ROGERS, JOSEPH
3948 HWY 90
PACE, FL 325718998 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: D
Name: CARNLEY, RAY
Address: 5314 MORGAN RIDGE DR
City-St-Zip: MILTON, FL 32570 US

Title: D
Name: DAVIS, ANTHONY
Address: 3035 WHITLEY LANE
City-St-Zip: PACE, FL 32571

Title: D
Name: JOHNSON, RICHARD
Address: 4321 RHONDA ROAD
City-St-Zip: PACE, FL 32571

Title: ST
Name: COLLINGSWORTH, EDDIE
Address: 3950 OMEGA STREET
City-St-Zip: PACE, FL 32571

Title: D
Name: LOYED, CHARLES
Address: 4847 JENNIFER DRIVE
City-St-Zip: PACE, FL 32571

Title: D
Name: TOMPKINS, JEREMY
Address: 5616 DOVE DRIVE
City-St-Zip: PACE, FL 32571

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH A. ROGERS

REV

05/07/2010

Electronic Signature of Signing Officer or Director

_____ Date