

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001474

**FILED**  
**Mar 07, 2012**  
**Secretary of State**

**Entity Name:** YIELDED EVANGELICAL SERVANTS, INC.

**Current Principal Place of Business:**

2126 CONTINENTAL ST  
ST CLOUD, FL 34769

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 700697  
ST CLOUD, FL 34770

**New Mailing Address:**

**FEI Number:** 54-1558343

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LATOURE, BERNARD T  
2126 CONTINENTAL ST  
ST CLOUD, FL 34769 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: S  
Name: LATOURE, JEAN  
Address: PO BOX 700697  
City-St-Zip: ST CLOUD, FL 347700697

Title: T  
Name: BILBY, CHRISTENA  
Address: PO BOX 700697  
City-St-Zip: ST CLOUD, FL 347700697

Title: VP  
Name: JEAN, LOUIS  
Address: PO BOX 700697  
City-St-Zip: ST CLOUD, FL 347700697

Title: D  
Name: PRIEST, SCOTT  
Address: PO BOX 700697  
City-St-Zip: ST CLOUD, FL 347700697

Title: P  
Name: LATOURE, BERNARD T  
Address: PO BOX 700697  
City-St-Zip: ST CLOUD, FL 347700697

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: CHRISTENA M. BILBY

T

03/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date