

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006082

FILED
Apr 02, 2009
Secretary of State

Entity Name: VESSELS OF HONOR MINISTRIES, INC.

Current Principal Place of Business:

2514 VILLA DR. N W #3
CLEVELAND, TN 373122562 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3514
CLEVELAND, TN 373203514 US

New Mailing Address:

FEI Number: 43-2059289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, INGA M REV.
1251 FOXTREE TRAIL
APOPKA, FL 327123030 US

Name and Address of New Registered Agent:

POWELL, HELGA M
205 CYPRESS COURT
WINTER SPRINGS, FL 32708 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: HELGA M POWELL

04/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ATTARDO, ROSEMARIE REV.
Address: 2514 VILLA DR. N W #3
City-St-Zip: CLEVELAND, TN 373122562 US

Title: S () Delete
Name: WARREN, INGA M REV.
Address: 1251 FOXTREE TRAIL
City-St-Zip: APOPKA, FL 327123030 US

Title: D () Delete
Name: ATTARDO, ROSEMARIE REV.
Address: 2514 VILLA DR NW # 3
City-St-Zip: CLEVELAND, TN 373122562 US

Title: D (X) Delete
Name: WARREN, INGA M REV.
Address: 1251 FOXTREE TRAIL
City-St-Zip: APOPKA, FL 327123030 US

Title: D () Delete
Name: WILLIAMS, PAMELA MRS.
Address: 2032 LEISURE DRIVE
City-St-Zip: WINTER HAVEN, FL 338811263 US

Title: D (X) Delete
Name: MCMAHAN, MARTHA MRS.
Address: 2378 INTERLACKIN CIRCLE
City-St-Zip: CLEVELAND, TN 37312 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: RUSSELL, TERI
Address: 131 KELLY CIRCLE
City-St-Zip: SANFORD, FL 327737341 US

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 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: TERI RUSSELL

S

04/02/2009

Electronic Signature of Signing Officer or Director

Date