2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

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Entity Name: ZOELLER MINISTRIES, INC.

Current Principal Place of Business:

4631-105 SE 5TH AVE
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

POST OFFICE DRAWER 6885
FT. MYERS, FL 339116885

New Mailing Address:

FEI Number: 65-1033400 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ZOELLER, STEPHEN C PASTOR
4631-105 SE 5TH AVE
CAPE CORAL, FL 33904 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:	P/D	( ) Delete
Name:	ZOELLER, STEPHEN C	
Address:	4631-105 SE 5TH AVE	
City-St-Zip:	CAPE CORAL, FL 33904 US	
Title:	VP/D	( ) Delete
Name:	GRANT, STEVEN MICHAEL M REV.	
Address:	2439 MCGREGOR BLVD	
City-St-Zip:	FT MYERS, FL 33901	
Title:	T/D	( ) Delete
Name:	DAVIS, DORIS J REV	
Address:	453 WASHINGTON COURT	
City-St-Zip:	FT MYERS BEACH, FL 33931	
Title:	S/D	( ) Delete
Name:	THAGGARD, CHARLES E MR	
Address:	1951A COLLIER AVE	
City-St-Zip:	FT MYERS, FL 33901 US	
Title:	D	( ) Delete
Name:	SPIRO, DONALD E PASTOR	
Address:	533 BERT RIDGE ROAD	
City-St-Zip:	SCIENCE HILL, KY 42553 US	
Title:	D	( ) Delete
Name:	ZOELLER, STEPHANIE L CHAPLAI	
Address:	4631-105 SE 5TH AVENUE	
City-St-Zip:	CAPE CORAL, FL 33904 US	

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:	
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: STEPHEN CLARKE ZOELLER P/D 04/02/2009

Electronic Signature of Signing Officer or Director — Date