2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N03000004429

Entity Name: BEACON MINISTRIES, INC.

Current Principal Place of Business:

6250 WEST 21ST CT.
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

6250 WEST 21ST CT.
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 20-0055357 **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:

NOBLE, DR NELSON, CLAUDE SR
725 FIRST COURT
PALM HARBOR, FL 34684 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 ( ) Delete
Name: NOBLE, DR NELSON, CLAUDE SR.
Address: 725 FIRST COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: VP ( ) Delete
Name: NOBLE, VIRGINIA, LAVELLE
Address: 725 FIRST COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete
Name: CALKINS, PATRICIA R
Address: 5571-66TH AVE N
City-St-Zip: PINELLAS PARK, FL 33781

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:

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: PATRICIA R CALKINS D 05/01/2009

Electronic Signature of Signing Officer or Director — Date