

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009647

FILED  
Aug 17, 2008  
Secretary of State

Entity Name: FOR THE GLORY OF CHRIST MINISTRY, INC.

**Current Principal Place of Business:**

2651 PADDOCK CIRCLE  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

2651 PADDOCK CIRCLE  
CRESTVIEW, FL 32536

**New Mailing Address:**

FEI Number: 20-0398977      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

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

MORGAN, DEXTER  
2651 PADDOCK CIRCLE  
CRESTVIEW, FL 32536      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MORGAN, DEXTER  
Address: 2651 PADDOCK CIRCLE  
City-St-Zip: CRESTVIEW, FL 32536

Title: D      ( ) Delete  
Name: MCGRIFF, JANIE M  
Address: 2720 NW 208TH TERRACE  
City-St-Zip: MIAMI, FL 33056

Title: D      ( ) Delete  
Name: WEATHERSBY, LINDSEY D  
Address: 670 FLORIDA STREET  
City-St-Zip: ROXIE, MS 39661

Title: D      ( ) Delete  
Name: SMALL, CARLTON  
Address: 9630 NW 2ND STREET  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D      ( ) Delete  
Name: BODDIE, FRANK L  
Address: 14 DODGE STREET  
City-St-Zip: NEW BRITAIN, CT 06053

**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:

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: DEXTER MORGAN

D

08/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date