

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006630

FILED  
Sep 07, 2010  
Secretary of State

**Entity Name:** VOLUME OF THE BOOK MINISTRY INC.

**Current Principal Place of Business:**

3590 RECKER HIGHWAY  
SUITE 1  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

4630 OLD LUCERNE PARK RD.  
SUITE 1  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

P O BOX 2221  
EAGLE LAKE, FL 33839

**New Mailing Address:**

FEI Number: 86-1116277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLAY, VEORIA SR.  
44 BRANDY CHASE BLVD  
WINTER HAVEN, FL 33880 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: CEOD  
Name: CLAY, VEORIA SR.  
Address: 44 BRANDY CHASE BLVD  
City-St-Zip: WINTER HAVEN, FL 33880

Title: PD  
Name: CLAY, JUDY  
Address: 44 BRANDY CHASE BLVD  
City-St-Zip: WINTER HAVEN, FL 33880

Title: STD  
Name: MITCHELL, YOLANDA D  
Address: 137 WILLIAMSBURG COURT  
City-St-Zip: WINTER HAVEN, FL 33881

Title: D  
Name: MITCHELL, VONCHAE L  
Address: 137 WILLIAMSBURG COURT  
City-St-Zip: WINTER HAVEN, FL 33880

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: VEORIA CLAY SR.

CEOD

09/07/2010

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

\_\_\_\_\_  
Date