

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005791

FILED
May 01, 2009
Secretary of State

Entity Name: TOTAL MAN MINISTRIES CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

222 DORSEY SMITH LANE
QUINCY, FL 323526727

New Principal Place of Business:

Current Mailing Address:

222 DORSEY SMITH LANE
QUINCY, FL 323526727

New Mailing Address:

FEI Number: 59-3806573 **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:

KNOX, VIVIAN
198 DORSEY SMITH LANE
QUINCY, FL 323526727 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: C () Delete
Name: KNOX, ANTHONY L SR.
Address: 198 DORSEY SMITH LANE
City-St-Zip: QUINCY, FL 323526727

Title: S () Delete
Name: KNOX, VIVIAN
Address: 198 DORSEY SMITH LANE
City-St-Zip: QUINCY, FL 323526727

Title: VC () Delete
Name: SMITH, VINCENT
Address: 674 HENRY JONES RD.
City-St-Zip: WOODVILLE, FL 32362

Title: T () Delete
Name: MCCLOUD, RONALD
Address: 108 ASTOR AVE.
City-St-Zip: QUINCY, FL 32362

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:

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: VIVIAN KNOX

SECR

05/01/2009

Electronic Signature of Signing Officer or Director

Date