


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2008 08:00 AM
Secretary of State

DOCUMENT # N07426

1. Entity Name
LORDSHIP MINISTRIES, INC.



Principal Place of Business % P. DAVID NICHOLAS 5856 VISTA LINDA LN BOCA RATON, FL 33433	Mailing Address % P. DAVID NICHOLAS 5856 VISTA LINDA LN BOCA RATON, FL 33433
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02022008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2575706	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MOWRY, RICHARD M., JR.
 1351 BANYAN RD.
 BOCA RATON, FL 33432**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Richard M. Mowry, Jr.* (NOTE: Registered Agent signature required when reinstating) DATE 3/14/08

Filing Fee is **\$81.25** Due by **May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U000000833072
 02/27/08-80084-020 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NICHOLAS, P DAVID 5856 VISTA LINDA LANE BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NICHOLAS, ELEANOR 5856 VISTA LINDA LANE BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOWRY, RICHARD M., JR. 2877 TIMBERCREEK CIR BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *P David Nicholas* P David Nicholas DATE 2/11/08 DAYTIME PHONE # 561 750-0558