

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005792

FILED
Apr 29, 2011
Secretary of State

Entity Name: SHARING HIS PLAN MINISTRIES, INC.

Current Principal Place of Business:

1547 WESTWIND DRIVE
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

1547 WESTWIND DRIVE
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 27-0367240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, JACQUELINE S
1547 WESTWIND DRIVE
JACKSONVILLE BEACH, FL 32250 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: PD
Name: DAVIS, LEVI JR
Address: 1547 WESTWIND DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: VPD
Name: DAVIS, JACQUELINE S
Address: 1547 WESTWIND DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: STD
Name: DAVIS, CARMEN J
Address: 1547 WESTWIND DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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: LEVI DAVIS JR.

PD

04/29/2011

Electronic Signature of Signing Officer or Director

Date