

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004823

FILED
Mar 21, 2008
Secretary of State

Entity Name: JOHN & SALLY DREW MINISTRIES, INC.

Current Principal Place of Business:

5350 NW NEKOMA ST
PORT ST LUCIE, FL 34983 US

New Principal Place of Business:

Current Mailing Address:

5350 NW NEKOMA ST
PORT ST LUCIE, FL 34983

New Mailing Address:

5350 NW NEKOMA ST
PORT ST LUCIE, FL 34983 US

FEI Number: 65-0497571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DREW, JOHN D
5350 NW NEKOMA ST
PORT ST LUCIE, FL 34983 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 () Delete
Name: DREW, JOHN D
Address: 5350 NW NEKOMA ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VD () Delete
Name: DREW, SALLY C
Address: 5350 NW NEKOMA ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: D () Delete
Name: AUSTIN, JOYCE
Address: 7910 S 86TH E AVE
City-St-Zip: TULSA, OK 74133

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:

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: JOHN D. DREW

PD

03/21/2008

Electronic Signature of Signing Officer or Director

Date