

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001001

FILED
May 15, 2009
Secretary of State

Entity Name: GETTING YOUR HOUSE IN ORDER MINISTRIES, INC.

Current Principal Place of Business:

2400 CHASE AVENUE
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

P O BOX 671
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-3451690 **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:

PATTERSON, SHARON R
116 STERLING CT
SANFORD, FL 32771 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: CEO () Delete
Name: PATTERSON, S
Address: 116 STERLING CT
City-St-Zip: SANFORD, FL 32771

Title: P () Delete
Name: RIGGINS, ROBIN R
Address: 116 STERLING COURT
City-St-Zip: SANFORD, FL 32771

Title: ST () Delete
Name: MORTON, C
Address: 7907 RIVER RIDGE DR
City-St-Zip: TAMPA, FL 33677

Title: D () Delete
Name: HARRIS, BETTY MS
Address: 6101 TINLEY TERRACE
City-St-Zip: SANFORD, FL 32773

Title: D (X) Delete
Name: WANSLEY, L M
Address: 105 STERLING ST
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: HAYNES, SARAH MS
Address: 2035 MCCARTY AVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: PATTERSON, S PASTOR
Address: 116 STERLING CT
City-St-Zip: SANFORD, FL 32771

Title: P (X) Change () Addition
Name: RIGGINS, ROBIN R PASTOR
Address: 116 STERLING COURT
City-St-Zip: SANFORD, FL 32771

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: ROBIN R. RIGGINS

P

05/15/2009

Electronic Signature of Signing Officer or Director

Date