

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004429

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: BEACON MINISTRIES, INC.

**Current Principal Place of Business:**

6250 WEST 21ST CT.  
HIALEAH, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

5571-66TH AVE N  
PINELLAS PARK, FL 33781

**New Mailing Address:**

FEI Number: 20-0055357

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NOBLE, DR NELSON, CLAUDE SR  
725 FIRST COURT  
PALM HARBOR, FL 34684 US

**Name and Address of New Registered Agent:**

NOBLE, DR NELSON, CLAUDE SR  
21338 US HWY 19 N  
CLEARWATER, FL 33765 US

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: DR NELSON CLAUDE NOBLE SR

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NOBLE, DR NELSON, CLAUDE SR.  
Address: 21338 US HWY 19 N  
City-St-Zip: CLEARWATER, FL 33765

Title: D  
Name: CURRY, TERESA  
Address: 1319 WESTON OAK DR, APT 3205  
City-St-Zip: HOLIDAY, FL 34691

Title: D  
Name: CALKINS, PATRICIA R  
Address: 5571-66TH AVE N  
City-St-Zip: PINELLAS PARK, FL 33781

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: PATRICIA R CALKINS

D

04/30/2012

Electronic Signature of Signing Officer or Director

Date