2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#715514

FILED Jan 09, 2009 Secretary of State

Entity Name: ST. JOHN MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 3401 25TH AVENUE TAMPA, FL 33605 **Current Mailing Address: New Mailing Address:** 3401 25TH AVENUE TAMPA, FL 33605 FEI Number: 59-1275326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARKER, TONY 2004 S. 58TH ST. TAMPA, FL 33619 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NEWKIRK, EDDIE JR. Name: Name: 3305 E. 25TH AVENUE Address: Address: City-St-Zip: TAMPA, FL 33605 City-St-Zip: Title: () Delete Title: () Change () Addition GREEN, EDDIE Name: Name: Address: 6508 SEAFAIRER DR. Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: Title: () Delete Title: () Change () Addition PARKER, TONY Name: Name: 2004 S. 58TH STREET Address: Address: City-St-Zip: TAMPA, FL 33619 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: GAINER, WILLIE F ADM. Name: Address: 3302 N. 24TH AVE Address: City-St-Zip: TAMPA, FL 33605 City-St-Zip: Title: () Delete Title: (X) Change () Addition LANIER, SHIRLEY G SEC LANIER, SHIRLEY G SEC Name: Name: 3110 27TH AVE 3110 27TH AVE Address: Address: City-St-Zip: TAMPA, FL 33605 City-St-Zip: TAMPA, FL 33605 Title: () Delete Title: (X) Change () Addition MORGAN, LUETWANDA K DIR NEWKIRK, DWIGHT DIR Name: Name: Address: 3885 31ST STREET SOUTH Address: 2918 46TH AVENUE SOUTH ST. PETERSBURG,, FL 33712 ST. PETERSBURG,, FL 33712 City-St-Zip: 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: TONY PARKER TD 01/09/2009