2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 8:00 am Secretary of State

1. Entity Nam	MENT #732354 MINISTRIES, INC.				•	04-30-2007	90858 0	11 ****70).00
Principal Place of Business 584 SOUTH GREENWAY DRIVE PORT ORANGE, FL 32127 US Mailing Address 584 SOUTH GREENWAY PORT ORANGE, FL 32127					\$00Adaaa				
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address 584 South 6	- 	a d v					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1.51	04162007	Chg-NP	CR2E0	37 (12/06)	
City & State	е	PORT ORANGE	FL 3212	.7	4. FEI Numbe 59-160				plied For of Applicable
Zip	Country	Zip	Country USA		5. Certificate	of Status Desired	₽′	\$8.75 Add Fee Require	
	6. Name and Address of Current I	Registered Agent			7. Name and	Address of New	Registered .	Agent	
FISHER A	FRNADINE! VERNAD	YNE	Name						
FISHER, VERNADINE J UERNADYNE 584 SOUTH GREENWAY DRIVE PORT ORANGE, FL 32127			Street A	Street Address (P.O. Box Number is Not Acceptable)					
			City				FL	Zip Code	e
8. The above the obligat	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registered office o	or registered	d agent, or bo	th, in the State of F	Florida. I am	familiar with,	and accept
SIGNATURE (Derenadiine 9. ¿	Jisher .							
	Signature, typed or printed range of registered agent a	and title if applicable. (NOT	E: Registered Agent signa	klure required w	hen reinstating)		DATE		
	Signature, typed or printed febre of registed agent a Filling Fee Is \$81.25 Due by May 1, 2007	9. Election Car	E: Registered Agent signs mpaign Financing Contribution.		5.00 May 8		Make checl	k payable to	
:	Filing Fee is \$61.25	9. Election Car Trust Fund (mpaign Financing	_ ;	5.00 May 8	Fic	Make checl orida Depar	tment of St	late
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10.	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIR PD FISHER, DOUGLAS	9. Election Car Trust Fund (RECTORS	mpaign Financing Contribution.	D TIP-	55.00 May 8 Added to Fees	ANGES TO OFFIC	Make chect orida Depar ERS AND DI	tment of St	tate
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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with application with application of the corporation of the receiver or trustee empowered.

GNATURE:

| Signature and typed or printed Name of Signing Officer or Director | Date | Date | Daytine Proce 4

SIGNATURE: .