


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2008 08:00 AM
Secretary of State

DOCUMENT # 734980 1. Entity Name RICK CAMPANA MINISTRIES, INC.	
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Principal Place of Business 141 MUIRFIELD CIR NAPLES, FL 34113 US	Mailing Address 141 MUIRFIELD CIR NAPLES, FL 34113 US
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DO NOT WRITE IN THIS SPACE



01102008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1689006	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CAMPANA, RICK D. MIN.
141 MUIRFIELD CIRCLE
NAPLES, FL 34113**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD CAMPANA, RICK D. MIN. 141 MUIRFIELD CIR NAPLES, FL 34113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CAMPANA, NANCY 141 MUIRFIELD CIRCLE NAPLES, FL 34113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEINBERG, DALE 1313 PELICAN AVE NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HERNDON, DUDLEY 124 MOORINGS PARK DR H202 NAPLES, FL 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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02/15/08-80028-004 61.25

12. 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 an address, with all other like empowered.

SIGNATURE: Dudley Herndon Dudley Herndon 3 Feb 08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #