

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737488

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** OLFORD MINISTRIES INTERNATIONAL, INCORPORATED

**Current Principal Place of Business:**

4000 RIVERDALE RD  
MEMPHIS, TN 38115 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 383231  
GERMANTOWN, TN 38183231 US

**New Mailing Address:**

**FEI Number:** 23-7154628

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLALOCK, ROBERT G.  
802 11TH ST. WEST  
BRADENTON, FL 34205 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: T ( ) Delete  
Name: BAILEY, SCOTT MR.  
Address: 599 HAWKS PEAK ROAD  
City-St-Zip: COLLIERVILLE, TN 38017 US

Title: P&CD ( ) Delete  
Name: OLFORD, DAVID L DR.  
Address: 3985 N BORDEAUX CREEK COVE  
City-St-Zip: MEMPHIS, TN 38125

Title: VCD ( ) Delete  
Name: LAMB, JEFFREY MR  
Address: 303 BRAME ROAD  
City-St-Zip: RIDGELAND, MS 39157

Title: SD ( ) Delete  
Name: WHITED, TOMMY N DR  
Address: 940 COL. ARLINGTON RD. SUITE 109  
City-St-Zip: COLLIERVILLE, TN 38017 US

Title: CFO ( ) Delete  
Name: THOMPSON, WENDELL MR.  
Address: 8307 MOSSY CREEK DRIVE  
City-St-Zip: GERMANTOWN, TN 38138 US

Title: D ( ) Delete  
Name: ASHBY, CLAUED MR.  
Address: 3247 REMEMBRANCE TRACE  
City-St-Zip: LAWRENCEVILLE, GA 30044 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:

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: WENDELL THOMPSON

CFO

04/29/2009

Electronic Signature of Signing Officer or Director

Date