

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 22, 2009  
Secretary of State**

DOCUMENT# 751054

Entity Name: MARANATHA MINISTRIES, INC.

**Current Principal Place of Business:**

8620 NW 13 ST. LOT 2355  
GAINESVILLE, FL 32653 US

**New Principal Place of Business:**

8620 NW 13 ST. LOT 235  
GAINESVILLE, FL 32653 US

**Current Mailing Address:**

8620 NW 13 ST. LOT 2355  
GAINESVILLE, FL 32653 US

**New Mailing Address:**

8620 NW 13 ST. LOT 235  
GAINESVILLE, FL 32653 US

FEI Number: 59-1981838      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SHENK, PERRY M.  
8314 NW 36 AVE.  
GAINESVILLE, FL 32607 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: PD ( ) Delete  
Name: BUSBY, RANDOLPH F,  
Address: 8620 NW 13 ST LOT 235  
City-St-Zip: GAINESVILLE, FL 32653

Title: VPD ( ) Delete  
Name: SHENK, PERRY M.,  
Address: 8314 NW 36 AVE  
City-St-Zip: GAINESVILLE, FL 32606

Title: STD ( ) Delete  
Name: BUSBY, GLORIA R,  
Address: 8620 NW 13 ST LOT 235  
City-St-Zip: GAINESVILLE, FL 32653

**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:

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: RANDOLPH F. BUSBY

PRES

01/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date