

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764771

FILED
Jan 21, 2009
Secretary of State

Entity Name: MADE FREE MINISTRIES, INC.

Current Principal Place of Business:

212 UNION STREET
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1533
WINTER HAVEN, FL 338841155 US

New Mailing Address:

P. O. BOX 1533
WINTER HAVEN, FL 33882 US

FEI Number: 59-2331853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGETT, ALETA H
274 SANTA ROSA DR.
WINTER HAVEN, FL 33884 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: PCD () Delete
Name: BURGETT, ALETA
Address: 274 SANTA ROSA DR.
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: COSCIA, HEATHER
Address: 813 AVE. F. NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: HAYES, THOMAS
Address: 535 GREENBRIAR AVE.
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: HAYES, CAROLE
Address: 535 GREENBRIAR AVE.
City-St-Zip: CELEBRATION, FL 34747

Title: VP () Delete
Name: BURGETT, HEATH
Address: 274 SANTA ROSA DR.
City-St-Zip: WINTER HAVEN, FL 33884

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:

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: ALETA BURGETT

PCD

01/21/2009

Electronic Signature of Signing Officer or Director

Date