## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#769848** 

FILED Jul 09, <u>2</u>008 Secretary of State

Entity Name: CHRISTIAN 12 STEP MINISTRY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

415 NW FIRST AVE. OCALA, FL 34475 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 4321

OCALA, FL 34478 US

FEI Number: 59-2331714 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GEISEL, RAY 3301 SE 41ST PLACE EARNEST, LONNIE 3062 SE 159TH LANE RD US OCALA, FL 344807229 US SUMMERFIELD, FL 34491

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: LONNIE EARNEST 07/09/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete GEISEL, RAY GARRETT, JIMMY SR. Name: Name: 3301 SE 41ST PLACE Address: 6525 SW 138TH TERRACE Address:

City-St-Zip: OCALA, FL City-St-Zip: OCALA, FL 34481

Title: Title: (X) Change ( ) Addition ( ) Delete PORTER, ERNESTINE Name: FISHER, PHILLIP Name:

Address: 1618 NE 21TH STREET Address: 4680 SW 22ND PLACE City-St-Zip: OCALA, FL 34470 City-St-Zip: OCALA, FL 34474

Title: () Delete Title: (X) Change ( ) Addition

GEISEL, RITA Name: LINTON, GREG Name: 3301 SE 41ST PLACE Address: Address: 186 NW 68TH AVE City-St-Zip: OCALA, FL City-St-Zip: OCALA, FL 34482

Title: VD ( ) Delete Title: (X) Change ( ) Addition

Name: GARRET, JIMMY SR Name: PORTER, EARNESTINE 6525 SW 138TH TERR **1618 NE 21ST STREET** Address: Address: City-St-Zip: OCALA, FL 34481 City-St-Zip: OCALA, FL 34470

Title: ( ) Delete Title: (X) Change ( ) Addition

FISHER, PHILLIP SPILLER, RALPH DR. Name: Name: 4680 SW 22ND PLACE 16571 SE 95TH CR. Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: SUMMERFIELD, FL 34491

Title: () Delete Title: ( ) Change (X) Addition

BURNETT, BRAD Name: Name: Address: Address: 150 NE 52ND CT. OCALA, FL 34470 City-St-Zip: 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: DAVID R. POLK DD 07/09/2008