

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 830009

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** GOSPEL TRUTHS, INC.

**Current Principal Place of Business:**

11480 BAYSHORE ROAD  
N. FT. MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 50398  
TICE, FL 33994

**New Mailing Address:**

**FEI Number:** 58-1177809

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORTON, CAROLYN A  
11480 BAYSHORE RD.  
N. FT. MYERS, FL 33917 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: P  
Name: MORTON, CAROLYN A  
Address: 11480 BAYSHORE RD.  
City-St-Zip: N. FORT MYERS, FL

Title: S  
Name: KING, KINGSLEY D  
Address: 113 W. RUTHERFORD DR.  
City-St-Zip: NEWARK, DE 197132026

Title: T  
Name: MORAN, MELODY J  
Address: 241 CHEYENNE DRIVE  
City-St-Zip: BEAR, DE 19701

Title: T  
Name: MUMMERT, FRED  
Address: BOX 218, BLACK ROCK RD.  
City-St-Zip: HANOVER, PA 17331

Title: T  
Name: DERSTEIN, PHILLIP A  
Address: BOX 76, 702 MAIN ST.  
City-St-Zip: FORD, KS 67842

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN A. MORTON

P

03/12/2012

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

\_\_\_\_\_  
Date