

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000431

FILED  
Jan 16, 2012  
Secretary of State

**Entity Name:** TRANSFORMING MINISTRIES, INC.

**Current Principal Place of Business:**

4370 HWY 59  
BOX 215  
LLOYD, FL 32337 US

**New Principal Place of Business:**

4370 GAMBLE ROAD  
MONTICELLO, FL 32344 US

**Current Mailing Address:**

P.O. BOX 215  
LLOYD, FL 32337 US

**New Mailing Address:**

**FEI Number:** 36-4145468

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUCHHOLTZ, BEVERLY REV.  
4370 HWY 59  
BOX 215  
LLOYD, FL 32337 US

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

BUCHHOLTZ, BEVERLY REV.  
4370 GAMBLE ROAD  
MONTICELLO, FL 32344 US

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: BEVERLY BUCHHOLTZ

01/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PC  
Name: BUCHHOLTZ, TIMOTHY C REV  
Address: 4370 GAMBLE ROAD  
City-St-Zip: MONTICELLO, FL 32344 US

Title: VVCS  
Name: BUCHHOLTZ, BEVERLY REV  
Address: 4370 GAMBLE ROAD  
City-St-Zip: MONTICELLO, FL 32344 US

Title: D  
Name: MANSER, NORITA M MISS  
Address: 631 W. WILLOW STREET  
City-St-Zip: ELBURN, IL 60119 US

Title: D  
Name: YOUMANS, MELVIN REV  
Address: 484 FOREST GREEN DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: D  
Name: GERRELL, DON REV  
Address: 2716 PARSONS REST  
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: D  
Name: GRIFFIN, DAVID MR.  
Address: 201 SOUTH MONROE STREET, SUITE 201  
City-St-Zip: TALLAHASSEE, FL 323301

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: TIM BUCHHOLTZ

PC

01/16/2012

Electronic Signature of Signing Officer or Director

Date