

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002479

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: BILL KELLER MINISTRIES, INC.

**Current Principal Place of Business:**

6660 46TH AVENUE NORTH  
ST PETERSBURG, FL 33709

**New Principal Place of Business:**

**Current Mailing Address:**

6660 46TH AVENUE NORTH  
ST PETERSBURG, FL 33709

**New Mailing Address:**

FEI Number: 36-3897842      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KELLER, BILL  
6660 46TH AVENUE NORTH  
ST PETERSBURG, FL 33709      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: PCSD      ( ) Delete  
Name: KELLER, WILLIAM  
Address: 11585 HARBORSIDE CIR  
City-St-Zip: LARGO, FL 33773

Title: VD      ( ) Delete  
Name: WATTS, WILLIAM  
Address: 205 W. RANDOLPH #1300  
City-St-Zip: CHICAGO, IL

Title: D      ( ) Delete  
Name: HARRIS, LEONARD  
Address: 8110 S CLAREMONT  
City-St-Zip: CHICAGO, IL

Title: D      ( ) Delete  
Name: WALTERS, CLYDE J  
Address: 6020 82ND AVENUE NORTH  
City-St-Zip: PINELLAS PARK, FL

**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:

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: WILLIAM KELLER

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date