2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2008
Secretary of State

DOCUMENT# F04000004894

Entity Name: CHUCK PETERSON MINISTRIES: ALIVE & WELL, INC.

Current Principal Place of Business:

9700 BLUE STONE CIRCLE
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

9700 BLUE STONE CIRCLE
FORT MYERS, FL 33913

New Mailing Address:

FEI Number: 41-1913929 **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:

PETERSON, CHUCK
9700 BLUE STONE CIRCLE
FORT MYERS, FL 33913 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: C ( ) Delete
Name: LINDER, DAVE
Address: 5438 132ND STREET
City-St-Zip: SAVAGE, MN 55378

Title: VC ( ) Delete
Name: LINDER, CHERI
Address: 5438 132ND STREET
City-St-Zip: SAVAGE, MN 55378

Title: PS ( ) Delete
Name: PETERSON, LINDA
Address: 9700 BLUE STONE CIRCLE
City-St-Zip: FORT MYERS, FL 33913

Title: VP ( ) Delete
Name: PETERSON, CHUCK
Address: 9700 BLUE STONE CIRCLE
City-St-Zip: FORT MYERS, FL 33913

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: LINDA PETERSON PS 07/12/2008
Electronic Signature of Signing Officer or Director — Date