2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001544

Title:

Name:

Address:

City-St-Zip:

000WIEWY#1 00000001044

FILED Jan 14, 2009 Secretary of State

Entity Name: WHOSOEVER MINITRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1331 BEVILLE RD 708 PELICAN BAY DR. DAYTONA BEACH, FL 32119 DAYTONA BEACH, FL 32119 **Current Mailing Address: New Mailing Address:** 708 PELICAN BAY DR. P.O. BOX 9591 DAYTONA BEACH, FL 32119 DAYTONA BEACH, FL 32120 FEI Number: 74-2914479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRESHAM, FRANK 708 PELICÁN BAY DR. DAYTONA BEACH, FL 32119 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GRESHAM, FRANK Name: Name: Address: 708 PELICAN BAY DR. Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BOGGS, DAVID Name: Address: 5116 EAST 86TH STREET Address: City-St-Zip: OWASSO, OK 74055 City-St-Zip: Title: () Delete Title: () Change () Addition GRESHAM, JANET Name: Name: 708 PELICAN BAY DR. Address: Address: City-St-Zip: DAYTONA BEACH, FL 32119 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: FRANK A. GRESHAM P 01/14/2009

() Delete

EZELL, JOHN

1268 HAWTHORAE DR

NEOSH, MO 64850

(X) Change () Addition

WASSON, GARY

ANDERSON, MO 64831

402 MAX ST.