## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000006586

FILED Apr 02, 2008 Secretary of State

Entity Name: MINISTRY ADVANCE FOUNDATION - CORPORATION

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
	INERAL AVEN N, CO 80120	IUE SUITE D		17720 NE HALSEY ST. PORTLAND, OR 97230-677		
Current M	lailing Addres	ss:	New Mai	New Mailing Address:		
1501 W MINERAL AVENUE SUITE D LITTLETON, CO 80120				PO BOX 30029 PORTLAND, OR 97294-002		
FEI Number:	: 36-4111441	FEI Number Applied For ( )	FEI Number Not Ap	plicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name an	d Address	of New Registered Agent:	
1201 HAYS TALLAHAS The above	S STREET SSEE, FL 323		ourpose of changing	ı its register	ed office or registered agent, or both,	
SIGNATUF	RE:					
	Electro	nic Signature of Registered Age	ent		Date	
OFFICERS	S AND DIREC	TORS:	ADDITIO	NS/CHANG	SES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	WINTER, MICH	RAL AVENUE SUITE D	Title: Name: Address: City-St-Zip:		(X) Change () Addition RY HALSEY ST. D, OR 97230-677	
Title: Name: Address: City-St-Zip:	S ( JEFFREYS, GI 2530 WASHING DENVER, CO	GTON STREET	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( WECKESSER, 1501 W. MINE LITTLETON, C	RAL AVENUE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	C ( ANDERSON, R 206 COOPER : ST. CLOUD, M	AVE. N	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ZIMMERMAN, 1121 SW SALI PORTLAND, O	MON ST.	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MAZOROL, PA	TON AVE. SUITE 700	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	

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: OPP, JERRY P 04/02/2008