

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90010 048 ****61.25

DOCUMENT # F07000001279

1. Entity Name
EL ELYON MINISTRIES, INC.



Principal Place of Business
**3768 NC HWY 58
WARRENTON, NC 27589**

Mailing Address
**PO BOX 16551
PANAMA CITY, FL 32406**

50002427



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03192008

Chg-NP

CR2E037 (12/06)

4. FEI Number
56-2250255

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ALSTON, JOHNNY E
1802 FLOWER AVE
I-102
PANAMA CITY, FL 32405**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
PERSON, HERMAN
RT 2 BOX 157
WARRENTON, NC 27589** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
Sheila Starghill
18205 Wisconsin
Detroit MI 48221** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
HUNT, DONALD
408 W FRANKLIN ST
WARRENTON, NC 27589** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
Margaret Jones
5649 Autumn Valley Dr.
Memphis TN 38135** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MADAR, REBECCA
1242 WAYBURN
GROSSE POINTE PARK, MI 48230** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Tanine Ball
284 Carrie Dunn Rd.
Norlina NC 27563** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCOTT, EDITH
18302 GALLAGHER
DETROIT, MI 48234** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Eric Small
3750 Betty Louise Dr.
Panama City FL 32405** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ALSTON, JOHNNY E
1802 FLOWER AVE I-102
PANAMA CITY, FL 32405** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPT
ALSTON, VICTORIA
1802 FLOWER AVE I-102
PANAMA CITY, FL 32405** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Johnny Alston* **Johnny Alston**

4-19-08 850-960-2072

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #