2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005205

1808 HWY 21 WEST

CALDWELL, TX 77836 US

Address:

City-St-Zip:

Entity Name: FULL HOUSE MINISTRIES, INC.

FILED Mar 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2140 RANGE ROAD 2140 RANGE ROAD SUITE B SUITE A CLEARWATER, FL 33765 CLEARWATER, FL 33765 **Current Mailing Address: New Mailing Address:** PO BOX 4486 CLEARWATER, FL 337584486 FEI Number: 74-2356336 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: WITHERALL, ELIZABETH A 5162 JENSON AVE. SPRINGHILL, FL 34608 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: PDC () Change () Addition () Delete BERNARD, DANIEL G Name: Name: 2069 PLATEAU RD. Address: Address: City-St-Zip: CLEARWATER, FL 33755 US City-St-Zip: Title: VDC () Delete Title: () Change () Addition BERNARD, KATHRYN E Name: Name: Address: 2069 PLATEAU RD. Address: City-St-Zip: CLEARWATER, FL 337584486 US City-St-Zip: Title: STD () Delete Title: () Change () Addition KUBICKI, BRENDA Name: Name: 1808 HWY. 21 WEST Address: Address: City-St-Zip: CALDWELL, TX 77836 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: WOZNIAK, VINCE Name: 2005 GREENBIER BLVD. H5 Address: Address: City-St-Zip: CLEARWATER, FL 33763 US City-St-Zip: Title: Title: () Delete () Change () Addition KUBICKI, DON Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: KATHRYN E. BERNARD VDC 03/15/2009