

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000928

FILED
Apr 06, 2009
Secretary of State

Entity Name: SHOULDER TO SHOULDER MINISTRIES, INC.

Current Principal Place of Business:

609 CHIVAS COURT
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

609 CHIVAS COURT
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-3634007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, MICHAEL F
3601 MARBON ROAD
JACKSONVILLE, FL 32223 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: PD () Delete
Name: MCCONNELL, JAMES R
Address: 3601 MAROON RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: DVP () Delete
Name: NIGHTINGALE, TERESA A
Address: 609 CHIVAS COURT
City-St-Zip: ORANGE PARK, FL 32073

Title: SD () Delete
Name: MCCONNELL, PATTY
Address: 3601 MAROON RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: TD () Delete
Name: KELLY, MIKE
Address: 3601 MAROON RD
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCONNELL, JAMES R
Address: 3601 MARBON RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: MCCONNELL, PATTY
Address: 3601 MARBON RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: TD (X) Change () Addition
Name: KELLY, MIKE
Address: 3601 MARBON RD
City-St-Zip: JACKSONVILLE, FL 32223

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: MIKE KELLY

TD

04/06/2009

Electronic Signature of Signing Officer or Director

Date