

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003305

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: FLORIDA MEN OF INTEGRITY, INC.

**Current Principal Place of Business:**

4223 NW 32ND STREET  
GAINESVILLE, FL 326051412 US

**New Principal Place of Business:**

**Current Mailing Address:**

4223 NW 32ND STREET  
GAINESVILLE, FL 326051412 US

**New Mailing Address:**

FEI Number: 59-3640511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GUTH, JIM DR  
4223 NW 32ND STREET  
GAINESVILLE, FL 326051412 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: EXDD ( ) Delete  
Name: GUTH, JIM DR.  
Address: 4223 NW 32ND STREET  
City-St-Zip: GAINESVILLE, FL 326051412

Title: BMCA ( ) Delete  
Name: BRENNEMAN, TOM  
Address: 7748 NE 36TH STREET  
City-St-Zip: GAINESVILLE, FL 32609

Title: BMT ( ) Delete  
Name: BENJAMIN, PAUL  
Address: P O BOX 952517  
City-St-Zip: LAKE MARY, FL 32795

Title: BDMA ( ) Delete  
Name: HARDEE, DANA  
Address: 13202 MORAN DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: BMFP ( ) Delete  
Name: SUMMERLIN, STEVE  
Address: 4014 NW 15TH STREET  
City-St-Zip: GAINESVILLE, FL 32605

Title: BDAS ( ) Delete  
Name: WHITE, ED  
Address: 3708 HILLTOP AVENUE SOUTH  
City-St-Zip: LAKELAND, FL 33803

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: JAMES H. GUTH

EXDD

01/03/2008

Electronic Signature of Signing Officer or Director

Date