

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005352

FILED
Apr 01, 2009
Secretary of State

Entity Name: THE MAST BROTHERS MINISTRY, INC.

Current Principal Place of Business:

20 MEADOWDALE ST
BEVERLY HILLS, FL 34464

New Principal Place of Business:

Current Mailing Address:

20 MEADOWDALE ST
BEVERLY HILLS, FL 34464

New Mailing Address:

FEI Number: 59-3708582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAST, ALLEN D SR
20 MEADOWDALE ST
BEVERLY HILLS, FL 34464 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: MAST, ALLEN D SR
Address: 20 MEADOWDALE ST
City-St-Zip: BEVERLY HILLS, FL 34464

Title: VD () Delete
Name: MAST, EMMA A
Address: 20 MEADOWDALE ST
City-St-Zip: BEVERLY HILLS, FL 34464

Title: D () Delete
Name: EDWARDS, RICHARD
Address: 5390 W PIUTE DR.
City-St-Zip: BEVERLY HILLS, FL 34465

Title: SD () Delete
Name: EDWARDS, BESS
Address: 5390 W PIUTE DR.
City-St-Zip: BEVERLY HILLS, FL 34465

Title: TD () Delete
Name: WEBB, JUDY
Address: 15105 NW 150TH AVE APT 1007
City-St-Zip: ALACHUA, FL 32615

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:

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: ALLEN D. MAST SR.

PD

04/01/2009

Electronic Signature of Signing Officer or Director

Date