

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007114

FILED
Jan 27, 2009
Secretary of State

Entity Name: FEED HIS SHEEP MINISTRIES INCORPORATED

Current Principal Place of Business:

14002 PALM BCH BLVD
FT MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

14002 PALM BCH BLVD
FT MYERS, FL 33905

New Mailing Address:

FEI Number: 65-1055353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISHER, CATHY R
3800 WILLIAMSON ROAD
FT MYERS, FL 33905 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: WISHER, CATHY R
Address: 3790 WILLIAMSON ROAD
City-St-Zip: FORT MYERS, FL 33905

Title: VD () Delete
Name: PIGOTT, VIVIAN
Address: 4681-8 LAKESIDE CLUB BLVD
City-St-Zip: FT MYERS, FL 33905

Title: STD () Delete
Name: RYMAN, KELLY A
Address: 3790 WILLIAMSON ROAD
City-St-Zip: FORT MYERS, FL 33905

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:

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: KELLY RYMAN

STD

01/27/2009

Electronic Signature of Signing Officer or Director

Date