

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008038

FILED
Apr 03, 2009
Secretary of State

Entity Name: WHITE HORSE MINISTRY, INC.

Current Principal Place of Business:

921 FAITH CIRCLE EAST #76
BRADENTON, FL 34212

New Principal Place of Business:

Current Mailing Address:

1767 LAKE WOOD RANCH BLVD. #294
BRADENTON, FL 342114906

New Mailing Address:

FEI Number: 65-0928734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAISER, KATRINA S
921 FAITH CIRCLE EAST # 76
BRADENTON, FL 34212 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: P () Delete
Name: KAISER, KATRINA S
Address: 921 FAITH CIRCLE EAST # 76
City-St-Zip: BRADENTON, FL 34210

Title: VP () Delete
Name: KAISER, JOHN L
Address: 921 FAITH CIRCLE EAST # 76
City-St-Zip: BRADENTON, FL 34212

Title: S/T () Delete
Name: KING, JUNE
Address: 1201 GLORY WAY BLVD LWC #1
City-St-Zip: BRADENTON, FL 34212

Title: O () Delete
Name: MAUZULE, TANDIE
Address: P.O. BOX 447
City-St-Zip: JASPER, AK 72641

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:

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: JOHN L KAISER

VP

04/03/2009

Electronic Signature of Signing Officer or Director

Date