

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008399

FILED  
Jan 17, 2007  
Secretary of State

**Entity Name:** GREATER WORKS ENDTIME MINISTRY, INC.

**Current Principal Place of Business:**

205 WEST S.R. 434, SUITE D  
D  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

155 WEST S.R. 434,  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

4947 COURTLAND LOOP  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

**FEI Number:** 59-3691949

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RYAN, EARL  
4947 COURTLAND LOOP  
WINTER SPRINGS, FL 32708 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: RYAN, EARL  
Address: 4947 COURTLAND LOOP  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: V (X) Delete  
Name: RYAN, VANESSA  
Address: 4947 COURTLAND LOOP  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: STD ( ) Delete  
Name: RYAN, JOY  
Address: 4947 COURTLAND LOOP  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete  
Name: CARLTON, NEBRASKA  
Address: 6725 TOTTENHAM CT.  
City-St-Zip: ORLANDO, FL 32808

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D ( ) Change (X) Addition  
Name: SANDERS, HAROLD E  
Address: 857 BROOKFIELD PL  
City-St-Zip: APOPKA, FL 32712 US

I hereby certify that the information supplied with this filing does not qualify for the 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: EARL RYAN

PD

01/17/2007

Electronic Signature of Signing Officer or Director

Date