

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008514

FILED
Apr 22, 2009
Secretary of State

Entity Name: THE PORCH MINISTRIES, INC.

Current Principal Place of Business:

720 N. ORANGE AVE.
ORLANDO, FL 32801

New Principal Place of Business:

4465 EDGEWATER DRIVE
SUITE E
ORLANDO, FL 32803

Current Mailing Address:

720 N. ORANGE AVE.
ORLANDO, FL 32801

New Mailing Address:

200 ST. ANDREWS BLVD
APT. 1307
WINTER PARK, FL 32792

FEI Number: 59-3691893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, JOHN W
200 ST. ANDREWS BLVD
#1307
WINTER PARK, FL 32792 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: DP () Delete
Name: COX, JOHN W
Address: 200 ST. ANDREWS BLVD. #1307
City-St-Zip: WINTER PARK, FL 32792

Title: DVPT () Delete
Name: NEIBERGER, MICHAEL
Address: 3040 ALOMA AVE
City-St-Zip: WINTER PARK, FL 32792

Title: DS () Delete
Name: NEIBERGER, DEBORAH
Address: 3040 ALOMA AVE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVPT (X) Change () Addition
Name: NEIBERGER, MICHAEL
Address: 860 NORTH ORANGE AVE., APT. #125
City-St-Zip: ORLANDO, FL 32801

Title: DS (X) Change () Addition
Name: NEIBERGER, DEBORAH
Address: 860 NORTH ORANGE AVE., APT. #125
City-St-Zip: ORLANDO, FL 32801

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 W. COX

DP

04/22/2009

Electronic Signature of Signing Officer or Director

Date