2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00736

FILED May 04, 2007 Secretary of State

Entity Name: IN HIS IMAGE MINISTRIES, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 212 MONTE VISTA RD. 212 MONTE VISTA RD. P.O. BOX 1328 CANDLER, NC 28715 CANDLER, NC 28715 **Current Mailing Address: New Mailing Address:** 212 MONTE VISTA RD. PO BOX 1328 P.O. BOX 1328 CANDLER, NC 28715 CANDLER, NC 28715 FEI Number: 59-2350420 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KING, MARILYN 144 PROPHETS PARKWAY SANTA ROSA BEACH, FL 32459 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROOKS, GARY L., Name: Name: 212 MONTE VISTA RD. Address: Address: City-St-Zip: CANDLER, NC City-St-Zip: Title: STD Title: STD (X) Change () Addition () Delete BROOKS, LYNN, Name: BROOKS, LYNN Name: Address: 212 MONTE VISTA RD. Address: 212 MONTE VISTA RD. City-St-Zip: CANDLER, NC City-St-Zip: CANDLER, NC Title: () Delete Title: (X) Change () Addition WEBSTER, S. S. FREED, MICKEY Name: Name: Address: 1491 BRENTWOOD DR Address: 749 BANDIT TRAIL City-St-Zip: MARIETTA, GA 30062 City-St-Zip: N. RICHLAND HILLS, TX 76180 () Delete Title: Title: () Change () Addition MAST, DALE Name: Name: 427 BRYANT'S CORNER RD. Address: Address: HARTLY, DE City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition WEBSTER, KATHY FREED, SANDIE Name: Name: 1491 BRENTWOOD DR. 749 BANDIT TRAIL Address: Address: N. RICHLAND HILLS, TX 76180 City-St-Zip: MARIETTA, GA 30062 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: LYNN BROOKS STD 05/04/2007