

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00936

FILED
Apr 11, 2007
Secretary of State

Entity Name: PIONEER MINISTRY TEAMS, INC.

Current Principal Place of Business:

5656 150TH AVE. N.
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 17663
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 65-0199735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHIOTTO, JEFFREY R
1531 SATSUMA ST
CLEARWATER, FL 33756 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: VPD () Delete
Name: GHIOTTO, SHERRY
Address: 1531 SATSUMA ST
City-St-Zip: CLEARWATER, FL 33756

Title: PD () Delete
Name: GHIOTTO, JEFFREY R
Address: 1531 SATSUMA ST.
City-St-Zip: CLEARWATER, FL 33756 US

Title: STD () Delete
Name: STEWART, DAVID
Address: 3674 ROSYLN RD
City-St-Zip: VENICE, FL 34293 US

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 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: JEFFREY R. GHIOTTO

PD

04/11/2007

Electronic Signature of Signing Officer or Director

Date