

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004170

FILED
May 06, 2008
Secretary of State

Entity Name: ARMS OF ACTZION MINISTRIES, INCORPORATED

Current Principal Place of Business:

3126 JENKS AVENUE
PANAMA CITY, FL 32405 US

New Principal Place of Business:

Current Mailing Address:

3126 JENKS AVENUE
PANAMA CITY, FL 32405 US

New Mailing Address:

FEI Number: 59-3755725 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

BRAND, K E P
3126 JENKS AVE
PANAMA CITY, FL 32405 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: BRAND, K. E P
Address: 3126 JENKS AVE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: V () Delete
Name: AITCHISON, MELISSA A V
Address: 3126 JENKS AVE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: S () Delete
Name: TERRY, CYNTHIA L S
Address: 1852 AIRPORT CIRCLE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: D () Delete
Name: MARINACCI, RALPH D
Address: 7033 S. LAGOON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 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:

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: K. BRAND

P

05/06/2008

Electronic Signature of Signing Officer or Director

_____ Date