

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004849

Entity Name: 4000 MINISTRY INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1122 W ARCH ST
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

1122 W. ARCH STREET
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-3727968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HUNTER, CATHY E
1122 W ARCH ST
TAMPA, FL 33607 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: HUNTER, CATHY E
Address: 1122 W ARCH ST
City-St-Zip: TAMPA, FL 33607

Title: DV () Delete
Name: STEVENS, MONROE L
Address: 1122 W ARCH ST
City-St-Zip: TAMPA, FL 33607

Title: DST () Delete
Name: HUNTER, CHARISE
Address: 1122 W ARCH ST
City-St-Zip: TAMPA, FL 33607

Title: V () Delete
Name: JONES, KAY
Address: 1122 W. ARCH
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: HUNTER, CHARISE O
Address: 1122 W ARCH ST
City-St-Zip: TAMPA, FL 33607

Title: DST (X) Change () Addition
Name: LENOX, GERALDINE
Address: 1122 W ARCH ST
City-St-Zip: TAMPA, FL 33607

Title: V (X) Change () Addition
Name: DICKENS, CHRYSANTHEUM
Address: 1122 W. ARCH
City-St-Zip: TAMPA, FL 33607

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: CATHY ELAINE HUNTER

DP

04/30/2008

Electronic Signature of Signing Officer or Director

Date