

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004905

FILED  
May 07, 2011  
Secretary of State

**Entity Name:** FAITHFUL & TRUE MINISTRIES, INC.

**Current Principal Place of Business:**

2729 S. R. 50  
MASCOTTE, FL 34753

**New Principal Place of Business:**

4863 TREASURE CAY ROAD  
TAVARES, FL 32778

**Current Mailing Address:**

PO B O X 398  
GROVELAND, FL 34736

**New Mailing Address:**

**FEI Number:** 59-3732551      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WINBUSH, JOYCE RA  
770 E. MAGNOLIA AVE  
LONGWOOD, FL 32750      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  
Name: HALL, LINDA G  
Address: 4863 TREASURE CAY ROAD  
City-St-Zip: TAVARES, FL 32778

Title: DV  
Name: HALL, SHELLY  
Address: 4863 TREASURE CAY ROAD  
City-St-Zip: TAVARES, FL 32778

Title: D  
Name: HOWELL, RUTHIE  
Address: 1021 FLORIDA AVENUE  
City-St-Zip: GROVELAND, FL 34736

Title: ST  
Name: HALL, LINDA  
Address: 4863 TREASURE CAY ROAD  
City-St-Zip: TREASURE CAY ROAD, FL 32778

Title: D  
Name: CLUNIS, CLAUDIA  
Address: 2045 NEWTOWN RD  
City-St-Zip: GROVELAND, FL 34736

I hereby 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 all other like empowered.

SIGNATURE: LINDA G HALL

PST

05/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date