

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005401

FILED
Apr 23, 2009
Secretary of State

Entity Name: CHRIS MUSGROVE MINISTRIES, INC.

Current Principal Place of Business:

1306 EDGEWOOD DR
VALDOSTA, GA 31601

New Principal Place of Business:

Current Mailing Address:

PO BOX 2980
VALDOSTA, GA 31604

New Mailing Address:

FEI Number: 59-3760724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSGROVE, CHRIS
2010 N. SHERWOOD DR.
VALDOSTA, FL 31602 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: D () Delete
Name: GRIFFIN, RUSTY
Address: 3821 SKIPPER BRIDGE ROAD
City-St-Zip: VALDOSTA, GA 31601

Title: D (X) Delete
Name: REAMES, JEFF
Address: 5977 OUSLEY RD.
City-St-Zip: VALDOSTA, GA 31601

Title: D () Delete
Name: HOULIHAN, JOHN
Address: 87 CHAPEL DRIVE, APT. 1
City-St-Zip: LAKE JUNALUSKA, NC 28745

Title: P () Delete
Name: MUSGROVE, CHRIS
Address: 2010 N. SHERWOOD DR.
City-St-Zip: VALDOSTA, GA 31602

Title: S () Delete
Name: MUSGROVE, TERRI
Address: 2010 N. SHERWOOD DR.
City-St-Zip: VALDOSTA, GA 31602

Title: D () Delete
Name: GIBBS, DON
Address: P.O. BOX 207
City-St-Zip: ADEL, GA 31620

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:

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City-St-Zip:

Title: () Change () Addition
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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: CHRIS MUSGROVE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date