2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Feb 21, 2008
Secretary of State

DOCUMENT# N01000005475

Entity Name: GOTELL MINISTRIES, INC.

Current Principal Place of Business:

1546 GIRVIN RD
JACKSONVILLE, FL 32225 US

New Principal Place of Business:

Current Mailing Address:

1546 GIRVIN ROAD
JACKSONVILLE, FL 32225 US

New Mailing Address:

FEI Number: 59-3734402 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACK, FREDERICK W
1546 GIRVIN RD
JACKSONVILLE, FL 32225 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: MACK, AUDREY C
Address: 1546 GIRVIN RD
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVP ( ) Delete
Name: MACK, FREDERICK W
Address: 1546 GIRVIN RD
City-St-Zip: JACKSONVILLE, FL 32225

Title: T ( ) Delete
Name: TRIMBLE, LINDA M
Address: 101 FOX VALLEY DR
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete
Name: BLACK, BRUCE-TED
Address: 23586 WILMINGTON CT
City-St-Zip: MURIETTA, CA 92562

Title: D ( ) Delete
Name: WALLACE, STEVE
Address: 11733 CRUSSELLE DR
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change ( ) Addition
Name: MILLER, JOYCE
Address: 12511 CORMORANT DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: T (X) Change ( ) Addition
Name: MACK, FREDERICK W
Address: 1546 GIRVIN ROAD
City-St-Zip: JACKSONVILLE, FL 32225

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

Title: D (X) Change ( ) Addition
Name: TRIMBLE, LINDA M
Address: 101 FOX VALLEY DR
City-St-Zip: LONGWOOD, FL 32779

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: AUDREY C. MACK DP 02/21/2008

Electronic Signature of Signing Officer or Director — Date