

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006290

FILED
Jan 16, 2009
Secretary of State

Entity Name: IMPACT MINISTRIES OF BRANDON, INCORPORATED

Current Principal Place of Business:

3001 S KINGS AVE
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

3001 S KINGS AVE
BRANDON, FL 33511

New Mailing Address:

FEI Number: 59-3720342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT SR, REV JERRY
732 CAPE COD CIR.
VALRICO, FL 33594 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: WRIGHT, JERRY N SR
Address: 732 CAPE COD CIR.
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: VELAZQUEZ, JOE A
Address: 13310 WATERFORD RUN DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: DEBOE, JOHN W
Address: 7611 REINDEER RD.
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: DEBOE, BETTY
Address: 7611 REINDEER RD
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: BOATWRIGHT, PHYLLIS
Address: 41503 NIPPER RD.
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D () Delete
Name: BOATWRIGHT, JOHN
Address: 41503 NIPPER RD.
City-St-Zip: ZEPHYRHILLS, FL 33540

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:

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: JERRY N. WRIGHT, SR

D

01/16/2009

Electronic Signature of Signing Officer or Director

Date