2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N01000008815

FILED Apr 16, 2007 8:00 am Secretary of State

1. Entity Name STABLE MINISTRIES, INC.					04-16-2007 90	0086 036 ****	61.25	
7445 BLUEJACKET PLACE P 0		Mailing Address P O BOX 2418 GOLDENROD, FL 32733						
2. Principal Place of Business - No P.O. Box # 3. Maiting Address 7445 Blue Tacket Place E								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092007 C	Chg-NP C	CR2E037 (12/06)		
City & State Winter Park, FL		City & State		4. FEI Number 56-22621	50		pplied For ot Applicable	
		Zip	p Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
1	E JACKET PLACE E		Street Addre	ss (P.O. Box Number is	Not Acceptable)		· · · · · · · · · · · · · · · · · · ·	
WINTER PARK, FL 32792								
			City			FL Zip Coo		
8. The above the obligat	named entity submits this statement for the clons of registered agent.	ne purpose of changing its	registered office or regi	istered agent, or both, in	n the State of Florida	a. I am familiar with	, and accept	
SIGNATURE				····		· · · · · · · · · · · · · · · · · · ·		
Signature, typed or printed name of registered agent and Life A applicable. (NOTE: Registered Agent agnature required						DATE		
				queco when (entitating)	1	UAIE		
9	Filing Fee is \$61.25 Due by May 1, 2007		paign Financing	\$5.00 May Be Added to Fees	3663.4456633445.4444.4444.4444	check payable t Department of S	17/7/19/19/19/19/19/19/19/19	
10.	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIREC	B. Election Carr Trust Fund C CTORS	npaign Financing contribution.	\$5.00 May Be	Florida	e check payable to Department of S	V 10	
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD.	9. Election Carr Trust Fund C	npaign Financing contribution. 11. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Florida	s check payable t Department of 8	tete	
TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PO EDWARDS, DUANE	B. Election Carr Trust Fund C CTORS	npaign Financing contribution.	\$5.00 May Be Added to Fees	Florida	e check payable to Department of S	V 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37887	B. Election Carr Trust Fund C CTORS Delete	npaign Financing Contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees	Florida	e check payable to Department of S AND DIRECTORS IN	Starte N 10 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327656175	B. Election Carr Trust Fund C CTORS Delete	npaign Financing Contribution. 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME	\$5.00 May Be Added to Fees	Florida	e check payable to Department of S AND DIRECTORS IN	Starte N 10 Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE	B. Election Carr Trust Fund C CTORS Delete	paign Financing contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Florida	e check payable to Department of S AND DIRECTORS IN	Starte N 10 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327656175 D KLINE, AARON 7445 BLUE JACKET PLACE E WINTER PARK, FL 32792 SD	9. Election Carr Trust Fund C CTORS Delete	TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees	Florida	e check payable 1 Department of S AND DIRECTORS IN Change	N 10 Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE RAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327856175 D KLINE, AARON 7445 BLUE JACKET PLACE E WINTER PARK, FL 32792 SD EDWARDS, LINDA 250 CLARKTOWN RD	9. Election Carr Trust Fund C CTORS Delete Delete	TOTALE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees	Florida	check payable 1 Department of S AND DIRECTORS IN Change Change	N 10 Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327656175 D KLINE, AARON 7445 BLUE JACKET PLACE E WINTER PARK, FL 32792 SD EDWARDS, LINDA 250 CLARKTOWN RD ROAN MOUNTAIN, TN 37687	9. Election Carr Trust Fund C CTORS Delete Delete Delete	TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees	Florida	check payable to Department of S AND DIRECTORS IN Change Change	N 10 Addition Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327656175 D KLINE, AARON 7445 BLUE JACKET PLACE E WINTER PARK, FL 32792 SD EDWARDS, LINDA 250 CLARKTOWN RD ROAN MOUNTAIN, TN 37687 D COOKSEY, LEE	9. Election Carr Trust Fund C CTORS Delete Delete	TOTALE TOTALE	\$5.00 May Be Added to Fees	Florida	check payable 1 Department of S AND DIRECTORS IN Change Change	N 10 Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327856175 D KLINE, AARON 7445 BLUE JACKET PLACE E WINTER PARK, FL 32792 SD EDWARDS, LINDA 250 CLARKTOWN RD ROAN MOUNTAIN, TN 37687 D	9. Election Carr Trust Fund C CTORS Delete Delete Delete	THE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees	Florida	check payable to Department of S AND DIRECTORS IN Change Change	N 10 Addition Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327856175 D KLINE, AARON 7445 BLUE JACKET PLACE E WINTER PARK, FL 32792 SD EDWARDS, LINDA 250 CLARKTOWN RD ROAN MOUNTAIN, TN 37687 D COOKSEY, LEE 713 FOX VALLEY DR LONGWOOD, FL 32779 T	9. Election Carr Trust Fund C CTORS Delete Delete Delete	THE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees	Florida	check payable to Department of S AND DIRECTORS IN Change Change	N 10 Addition Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRECT PD EDWARDS, DUANE 250 CLARKTOWN RD. ROAN MOUNTAIN, TN 37687 D OLIVIO, DAVID 9437 BELMONT TERRACE OVIEDO, FL 327856175 D KLINE, AARON 7445 BLUE JACKET PLACE E WINTER PARK, FL 32792 SD EDWARDS, LINDA 250 CLARKTOWN RD ROAN MOUNTAIN, TN 37687 D COOKSEY, LEE 713 FOX VALLEY DR LONGWOOD, FL 32779	9. Election Carr Trust Fund C CTORS Delete Delete Delete Delete	THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees	Florida	check payable to Department of S AND DIRECTORS IN Change Change Change	N 10 Addition Addition Addition Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.