2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2007
Secretary of State

DOCUMENT# N02000000896

Entity Name: SERVANT'S HEART MINISTRIES, INC.

Current Principal Place of Business:

2018 SAMANTHA LANE
VALRICO, FL 33594

New Principal Place of Business:

504 98TH AVE NE
BELLEVUE, WA 98004

Current Mailing Address:

2018 SAMANTHA LANE
VALRICO, FL 33594

New Mailing Address:

50498TH AVE NE
BELLEVUE, WA 98004

FEI Number: 80-0030939 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WUHRMAN, THOMAS
2018 SAMANTHA LANE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

WUHRMAN, THOMAS
504 98TH AVE NE
BELLEVUE, FL 98004 US

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: THOMAS E WUHRMAN 07/20/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WUHRMAN, THOMAS E
Address: 2018 SAMANTHA LANE
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete
Name: WUHRMAN, JEANNETTE M
Address: 2018 SAMANTHA LANE
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete
Name: NEWMAN, AMY M
Address: 2018 SAMANTHA LANE
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete
Name: NEWMAN, KYLE A
Address: 2018 SAMANTHA LANE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WUHRMAN, THOMAS E
Address: 504 98TH AVE NE
City-St-Zip: BELLEVUE, WA 98004

Title: D (X) Change ( ) Addition
Name: WUHRMAN, JEANNETTE M
Address: 504 98TH AVE NE
City-St-Zip: BELLEVUE, WA 98004

Title: D (X) Change ( ) Addition
Name: NEWMAN, AMY M
Address: 504 98TH AVE NE
City-St-Zip: BELLEVUE, WA 98004

Title: D (X) Change ( ) Addition
Name: NEWMAN, KYLE A
Address: 504 98TH AVE NE
City-St-Zip: BELLEVUE, WA 98004

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: THOMAS E WUHRMAN PRES 07/20/2007
Electronic Signature of Signing Officer or Director — Date