## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002004

Entity Name: SPIRIT FREE MINISTRIES INCORPORATED

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:					
4800 S WE #1016 TAMPA, FL	STSHORE BLV 33611	<b>V</b> D								
Current Mailing Address:				New	New Mailing Address:					
4800 S WE #1016 TAMPA, FL	STSHORE BLV 33611	<b>V</b> D								
FEI Number: 03-0420205 FEI Number Applied For ( )				FEI Number N	Number Not Applicable ( ) Certificate of Status Desired ( )					
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:					
SEGER, CAROLE M 4800 S WESTSHORE BLVD #1016 TAMPA, FL 33611 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,										
in the State			•	'	0 0	J		Ŭ	<i>J</i>	,
SIGNATUR		o Cianatura of D	agistared Agest					Data		_
Electronic Signature of Registered Agent					Date					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	SEGER, GARY L	ORE BLVD #1016	3	Title: Name Addre City-\$			( ) Change	( ) Addition		
Title: Name: Address: City-St-Zip:	JOHNSON, JOHN	ORE BLVD #202		Title: Name Addre City-		VPD JOHNSON, J 101 HILLCRI MIDLOATHIA	EST STREE	W T		
Title: Name: Address: City-St-Zip:	SEC () I RICHARDSON, k 4510 W SEVILLA TAMPA, FL 336	A STREET		Title: Name Addre City-		SEC HAYES, JAN 6907 MARBI RIVERVIEW	LE FAWN PL			
Title: Name: Address: City-St-Zip:	JOHNSON, TAMI	TANZAS AVENUE		Title: Name Addre City-		D WATERS, Ro 4851 W GAN TAMPA, FL	IDY BLVD	. ,		
Title: Name: Address: City-St-Zip:	D () I RICHARDSON, H 4510 W SEVILLA TAMPA, FL 336	STREET		Title: Name Addre City-S			()Change	( ) Addition		
Title: Name: Address: City-St-Zip:	SEGER, CAROL	ORE BLVD #1016	3	Title: Name Addre City-:			()Change	( ) Addition		

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: CAROLE M SEGER TRES 04/21/2008