2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# N02000002070

Entity Name: THE DOVE MESSIAH'S DOVE MINISTRIES, INC.

Current Principal Place of Business:

7308 HWY 77
SOUTHPORT, FL 32409

New Principal Place of Business:

Current Mailing Address:

7308 HWY 77
SOUTHPORT, FL 32409

New Mailing Address:

FEI Number: 59-3247661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKER, REENA G
7308 HWY 77
SOUTHPORT, FL 32409 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:	P	( ) Delete
Name:	BIDDINGER, JOHN D	
Address:	1507 NASSAU STREET	
City-St-Zip:	SOUTHPORT, FL 32409	
Title:	V	( ) Delete
Name:	FARRIS, TIM	
Address:	6310 NORTHRIDGE DRIVE	
City-St-Zip:	YOUNGSTOWN, FL 32466	
Title:	S	( ) Delete
Name:	BAKER, REENA	
Address:	2413 KIMBERLY DRIVE	
City-St-Zip:	LYNN HAVEN, FL 32444	
Title:	D	( ) Delete
Name:	MASON, LYNN	
Address:	7821 DUVAL STREET	
City-St-Zip:	SOUTHPORT, FL 32409	
Title:	D	(X) Delete
Name:	PAGE, MARK	
Address:	10401 RESOTA BEACH ROAD	
City-St-Zip:	SOUTHPORT, FL 32409	
Title:	D	( ) Delete
Name:	RICHARDSON, DELL	
Address:	1517 NASSAU STREET	
City-St-Zip:	SOUTHPORT, FL 32409	

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: REENA G. BAKER S 01/27/2009
Electronic Signature of Signing Officer or Director — Date