

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002485

FILED  
Jun 24, 2012  
Secretary of State

**Entity Name:** J. W. HANKS SR. MINISTRIES, INC.

**Current Principal Place of Business:**

3651 SE 80TH STREET  
OCALA, FL 34480

**New Principal Place of Business:**

**Current Mailing Address:**

3651 SE 80TH STREET  
OCALA, FL 34480

**New Mailing Address:**

**FEI Number:** 59-3538866

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HANKS, JOHN W SR  
3651 SE 80TH STREET  
OCALA, FL 34480 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  
Name: HANKS, JOHN W SR  
Address: 3651 SE 80TH STREET  
City-St-Zip: Ocala, FL 34480

Title: D  
Name: HANKS, LILLIE  
Address: 3651 SE 80TH STREET  
City-St-Zip: Ocala, FL 34480

Title: D  
Name: COLEMAN, THELMA  
Address: 6540 S E 30 ST  
City-St-Zip: Ocala, FL 34480

Title: D  
Name: LAWTON, MAE HELEN  
Address: 2801 NE 127 PL  
City-St-Zip: SPARR, FL 32192

Title: D  
Name: SHAW, KEITH L  
Address: 4518 SE 1ST PLACE  
City-St-Zip: GAINESVILLE, FL 32641

I hereby 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 all other like empowered.

**SIGNATURE:** JOHN W. HANKS, SR.

D

06/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date