

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002908

FILED
Jan 26, 2008
Secretary of State

Entity Name: D. W. J. MINISTRIES, INC.

Current Principal Place of Business:

739 7TH STREET
CHIPLEY, FL 32428 US

New Principal Place of Business:

Current Mailing Address:

739 7TH STREET
CHIPLEY, FL 32428 US

New Mailing Address:

FEI Number: 01-0671485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWTON, VALERY
1238 COGGIN AVE
CHIPLEY, FL 32428 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: S () Delete
Name: LAWTON, VALERY
Address: 1238 COGGIN AVE
City-St-Zip: CHIPLEY, FL 32428

Title: P () Delete
Name: DAVID, WOODS PASTOR
Address: 102 LARAMIE CIRCLE
City-St-Zip: PANAMA CITY, FL 32404

Title: T () Delete
Name: JAMES, ROSE
Address: 1000 E 13 CT
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: RHYNES, VANESSA
Address: 799 ORANGE STREET
City-St-Zip: CHIPLEY, FL 32428

Title: D () Delete
Name: BYRD, LOIS
Address: 163 AVENUE D
City-St-Zip: PORT ST JOE, FL 32456

Title: D () Delete
Name: TERRANCE, CARA
Address: 1400 E 9TH STREET
City-St-Zip: PANAMA CITY, FL 32401

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
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City-St-Zip:

Title: () Change () Addition
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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: VALERY LAWTON

S

01/26/2008

Electronic Signature of Signing Officer or Director

Date