

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004127

FILED
May 18, 2007
Secretary of State

Entity Name: FRANKIE WALLS MINISTRIES, INC.

Current Principal Place of Business:

5285 NW 70TH AVE
LAUDERHILL, FL 33319

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 190056
LAUDERHILL, FL 33319

New Mailing Address:

P. O. BOX 190053
LAUDERHILL, FL 33319

FEI Number: 30-0059025 **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:

Name and Address of New Registered Agent:

WALLS, TINA
5285 NW 70TH AVE
LAUDERHILL, FL 33319 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WALLS, FRANKIE
Address: 7437 NW 34TH STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: DV () Delete
Name: WALLS, TINA
Address: 5285 NW 70TH AVENUE
City-St-Zip: LAUDERHILL, FL 33319

Title: DT () Delete
Name: WRIGHT, ADRIANNE
Address: 3230 NW 43 PLACE
City-St-Zip: OAKLAND PARK, FL 33309

Title: D () Delete
Name: WRIGHT, MARION
Address: 151 NW 33RD TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: KIRK, DERRICK
Address: 129 W DEMPSTER
City-St-Zip: MEMPHIS, TN 38109

Title: D () Change (X) Addition
Name: FLETCHER, SR, DAVID W SUPT.
Address: 4941 NW 17TH COURT
City-St-Zip: LAUDERHILL, FL 33313

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: FRANKIE WALLS

DP

05/18/2007

Electronic Signature of Signing Officer or Director

Date