2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

DOCUMENT# N02000004865

Entity Name: INTENSIVE CARE MINISTRIES, INC.

Current Principal Place of Business:

10701 SE US HWY 441
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

10701 SE US HWY 441
BELLEVIEW, FL 34420

New Mailing Address:

FEI Number: 20-2631605 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VINING, DON R
10701 SE US HWY 441
BELLEVIEW, FL 34420 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: DP
Name: VINING, DON R
Address: 10701 SE US HWY 441
City-St-Zip: BELLEVIEW, FL 34420

Title: D
Name: RICHARDSON, DONNY
Address: 2436 NE 11TH CT
City-St-Zip: OCALA, FL 34470

Title: D
Name: SHANKS, JAMES
Address: 6528 SE 110TH LANE
City-St-Zip: OCALA, FL 34420

Title: D
Name: PERCY, JAMES
Address: 8150 SE 128TH LANE
City-St-Zip: OCALA, FL 34491

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: DON VINING MGMR 03/21/2012
Electronic Signature of Signing Officer or Director Date