2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005289

FILED Feb 06, 2008 Secretary of State

Entity Name: THE SANCTUARY MINISTRIES, BAY AREA, INC.

Current Principal Place of Business: New Principal Place of Business: 2910 ORIENT ROAD 777 LUMSDEN ROAD TAMPA, FL 33619 BRANDON, FL 33511 US **Current Mailing Address: New Mailing Address:** PO BOX 1607 PO BOX 1607 SEFFNER, FL 33583 SEFFNER, FL 33583 US FEI Number: 05-0524383 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GARCIA, JUAN JR 1411 FERNWOOD PLACE SEFFNER, FL 33584 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete GARCIA, JUAN JR GARCIA, JR, JUAN PASTOR Name: Name: 1411 FERNWOOWD PLACE Address: 1411 FERNWOOWD PLACE Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip: SEFFNER, FL 33584 Title: () Delete Title: () Change () Addition Name: GARCIA, MARILYN Name: Address: 1411 FERNWOOD PLACE Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip: Title: () Delete Title: () Change () Addition YARLOTT, TRACEY Name: Name: Address: 1222 BARMERE LN Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: Title: () Delete Title: () Change () Addition HERNANDEZ, FRANK Name: Name: 1205 LAKEWOOD DR. Address: Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: Title: () Delete Title: () Change () Addition RIVERA, LUCAS Name: Name: 13855 AZALEA CR #24F Address: Address: City-St-Zip: TAMPA, FL 33613 City-St-Zip: Title: () Delete Title: () Change () Addition PEREZ. ELIZABETH Name: Name: Address: 11660 SUNSHINE POND RD Address: TAMPA, FL 33635 City-St-Zip: 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: JUAN GARCIA JR P 02/06/2008