2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005319

Entity Name: A GOD SEND MINISTRIES, INC.

FILED Apr 19, 2007 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|---|---|----------------------------------|---------------|---|--|---|
| 115 WOODSIDE DR. ORANGE PARK, FL 32073 | | | | P. O. BOX 2668 ORANGE PARK, FL 32067 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 115 WOODSIDE DR. ORANGE PARK, FL 32073 | | | | P. O. BOX 2668 ORANGE PARK, FL 32067 | | |
| FEI Number | : 14-1137392 | FEI Number Applied For () | FEI Number | r Not Appl | icable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| 613 CONS ORANGE | , PAMELA A STITUTION DR PARK, FL 320 | 73 US | ournoss of oh | oonging it | re registers | ed office or registered agent, or both, |
| | e named entity s e of Florida. | submits this statement for the p | ourpose of cr | ianging ii | s registere | ed office or registered agent, or both, |
| SIGNATUI | | | | | | |
| | Electron | ic Signature of Registered Ago | ent | | | Date |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | PCEO () RUSSELL, PAM 613 CONSTITU ORANGE PARK | TION DR. | Add | e: me: dress: y-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | TCFO () RUSSELL, DAN 613 CONSTITU ORANGE PARK | TION DR. | Add | e: me: dress: y-St-Zip: | 613 CONS | (X) Change () Addition DANNY L SR TITUTION DR. PARK, FL 32073 |
| Title: Name: Address: City-St-Zip: | COO () BAILEY, CYNTH 7809 MARSALA JACKSONVILLE | СТ | Add | e: me: dress: y-St-Zip: | CFO BAILEY, C 7809 MAR: JACKSON | |
| Title: Name: Address: City-St-Zip: | S () STEWART, HEN 21523 RIO CAN SAN ANTONIO, | AL | Add | e: me: dress: y-St-Zip: | | () Change () Addition |
| Title: Name: Address: City-St-Zip: | VP () HERRON, MAR' 12617 CEDAR I CHARLOTTE, N | POST LANE | Add | e: me: dress: y-St-Zip: | | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA A. RUSSELL PCEO 04/19/2007