

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 06, 2008
Secretary of State

DOCUMENT# N02000005487

Entity Name: POWER 2 KNOW MINISTRIES, INC.**Current Principal Place of Business:**117 E. AMELIA ST.
ORLANDO, FL 32801 US**New Principal Place of Business:****Current Mailing Address:**117 E. AMELIA ST.
ORLANDO, FL 32801 US**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LEADER, PHILIP
117 E. AMELIA ST.
ORLANDO, FL 32801 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: P () Delete
Name: MORRISON, BOBBIE L
Address: 1414 VANCE ST.
City-St-Zip: GREENSBORO, NC 27406 USTitle: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: JONES, DUSTIN
Address: 13796 80TH AVE. N.
City-St-Zip: SEMINOLE, FL 33776 USTitle: CFO () Change (X) Addition
Name: JONES, DUSTIN
Address: 13796 80TH AVE. N.
City-St-Zip: SEMINOLE, FL 33776 US

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: DUSTIN JONES

P

05/06/2008

Electronic Signature of Signing Officer or Director

Date