

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006311

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: THIRD DAY POWER MINISTRIES, INC.

**Current Principal Place of Business:**

277 TIGER LILY COURT  
ALTAMONTE SPRINGS, FL 327145842

**New Principal Place of Business:**

**Current Mailing Address:**

277 TIGER LILY COURT  
ALTAMONTE SPRINGS, FL 327145842

**New Mailing Address:**

FEI Number: 20-0000926

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ABRAHAM-CLARK, JANNET  
277 TIGER LILY COURT  
ALTAMONTE SPRINGS, FL 327145842 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: PT ( ) Delete  
Name: ABRAHAM-CLARK, JANNET  
Address: 277 TIGER LILY COURT  
City-St-Zip: ALTAMONTE SPRINGS, FL 327145842

Title: ST ( ) Delete  
Name: CLARK, RAYMOND  
Address: 277 TIGER LILY COURT  
City-St-Zip: ALTAMONTE SPRINGS, FL 327145842

Title: T ( ) Delete  
Name: OVERTON, DODE PASTOR  
Address: 8408 ATWOOD LAKE RD. N.E.  
City-St-Zip: MINERAL CITY, OH 44656

Title: T ( ) Delete  
Name: COTRONE, DANIEL PASTOR  
Address: 1185 N. WYMORE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32751

Title: T ( ) Delete  
Name: PRIVETTE, PHILLIP PASTOR  
Address: 1741 W. QUEEN ST.  
City-St-Zip: HAMPTON, VA 23666

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: BAUM, TERRY PASTOR  
Address: 512 SPRING CLUB DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: T (X) Change ( ) Addition  
Name: LEAVELL, ROSE MINISTR  
Address: 5210 RIVER OAKS  
City-St-Zip: CORPUS CHRISTI, TX 78413

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JANNET ABRAHAM CLARK

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date