

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000121

FILED
Mar 13, 2009
Secretary of State

Entity Name: SERVANTCARE MINISTRIES, INC.

Current Principal Place of Business:

341 SKYLER RUN
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

341 SKYLER RUN
DESTIN, FL 32541

New Mailing Address:

341 SKYLER RUN
DESTIN, FL 32541 US

FEI Number: 57-1161542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISE, DOROTHY D
341 SKYLER RUN
DESTIN, FL 32541 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: PD () Delete
Name: WISE, WILLIAM G
Address: 341 SKYLER RUN
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: WISE, DOROTHY D
Address: 341 SKYLER RUN
City-St-Zip: DESTIN, FL 32541

Title: TD () Delete
Name: ASHER, BETTY
Address: 294 CORINTHIAN PLACE
City-St-Zip: DESTIN, FL 32541

Title: VD () Delete
Name: SHEETS, RICHARD
Address: 1304 W DIAMOND SHORE LOOP
City-St-Zip: HERNANDO, FL 34442

Title: SD () Delete
Name: CONANT, RICHARD
Address: 34 INDIAN BAYOU DR.
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WISE, WILLIAM G
Address: 341 SKYLER RUN
City-St-Zip: DESTIN, FL 32541 US

Title: D (X) Change () Addition
Name: WISE, DOROTHY D
Address: 341 SKYLER RUN
City-St-Zip: DESTIN, FL 32541 US

Title: TD (X) Change () Addition
Name: ASHER, BETTY
Address: 294 CORINTHIAN PLACE
City-St-Zip: DESTIN, FL 32541 US

Title: VD (X) Change () Addition
Name: SHEETS, RICHARD
Address: 1491 ASBURY MILL RD
City-St-Zip: CLEVELAND, GA 30528 US

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: WILLIAM G. WISE

PD

03/13/2009

Electronic Signature of Signing Officer or Director

Date