

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000000310

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** PROPHET MARGIN MINISTRIES, INC.

**Current Principal Place of Business:**

300 FOREST CENTER DRIVE  
#26107  
KINGWOOD, TX 77339

**New Principal Place of Business:**

4522 WINDY HOLLOW DRIVE  
KINGWOOD, TX 77345

**Current Mailing Address:**

300 FOREST CENTER DRIVE  
#26107  
KINGWOOD, TX 77339

**New Mailing Address:**

4522 WINDY HOLLOW DRIVE  
KINGWOOD, TX 77345

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

JONES, ERIC A  
300 FOREST CENTER DRIVE  
#26107  
KINGWOOD, FL 77339 US

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

JONES, ERIC A  
4522 WINDY HOLLOW DRIVE  
KINGWOOD, FL 77345 US

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

04/30/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JONES, ERIC A  
Address: 4522 WINDY HOLLOW DRIVE  
City-St-Zip: KINGWOOD, TX 77345

Title: ST  
Name: JONES, LYNN T  
Address: 2625 ELDER ROAD  
City-St-Zip: KATY, TX 77493

Title: VP  
Name: RAILEY, MASON D  
Address: 3312 TALISMAN DRIVE  
City-St-Zip: MIDDLEBURG, FL 32068

I hereby 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 all other like empowered.

SIGNATURE: ERIC A JONES

P

04/30/2012

Electronic Signature of Signing Officer or Director

Date