2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N03000000707

Entity Name: L J MINISTRIES, INC.

Current Principal Place of Business:

4925 LANCER DR.
SEBRING, FL 33876

New Principal Place of Business:

4925 LANCER DR.
SEBRING, FL 33876 US

Current Mailing Address:

4925 LANCER DR.
SEBRING, FL 33876

New Mailing Address:

FEI Number: 81-0593185 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ABLES, CLIFFORD M III
551 SOUTH COMMERCE AVE.
SEBRING, FL 33870 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: D ( ) Delete
Name: OVERFIELD, LARRY J
Address: 4925 LANCER DR.
City-St-Zip: SEBRING, FL 33876

Title: D ( ) Delete
Name: OVERFIELD, MARY A
Address: 4925 LANCER DR.
City-St-Zip: SEBRING, FL 33876

Title: D ( ) Delete
Name: HARDY, EARL
Address: 1316 NANCESOWEE AVE
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete
Name: LAMB, DON
Address: 4400 LAKEVIEW DR
City-St-Zip: SEBRING, FL 33870

Title: D (X) Delete
Name: MCKAY, ROBERT
Address: 1321 OSPREY COVE DR
City-St-Zip: LORIDA, FL 33857

Title: D (X) Delete
Name: MCKAY, CONNIE
Address: 1321 OSPREY COVE DR
City-St-Zip: LORIDA, FL 33857

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: OVERFIELD, LARRY J
Address: 4925 LANCER DR.
City-St-Zip: SEBRING, FL 33876 US

Title: D (X) Change ( ) Addition
Name: OVERFIELD, MARY A
Address: 4925 LANCER DR.
City-St-Zip: SEBRING, FL 33876 US

Title: D (X) Change ( ) Addition
Name: HARDY, EARL
Address: 1316 NANCESOWEE AVE
City-St-Zip: SEBRING, FL 33870 US

Title: D (X) Change ( ) Addition
Name: LAMB, DON
Address: 4400 LAKEVIEW DR
City-St-Zip: SEBRING, FL 33870 US

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

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: LARRY J. OVERFIELD PRES 03/23/2009

Electronic Signature of Signing Officer or Director — Date