2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2008
Secretary of State

DOCUMENT# N03000001656

Entity Name: DISCIPLE SUPPORT MINISTRIES, INC.

Current Principal Place of Business:

1319 SOUTH POWERLINE ROAD
SUITE 160
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1319 SOUTH POWERLINE ROAD
SUITE 160
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 51-0452316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STOUT, HENRY
714 GARDENS DRIVE
APT. 201
POMPANO BEACH, FL 33069 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:	CHM	( ) Delete
Name:	PAUL, COWLEY	
Address:	1319 SOUTH POWERLINE ROAD #160	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	PD	( ) Delete
Name:	STOUT, HENRY	
Address:	714 GARDENS DRIVE, APT 201	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	TD	( ) Delete
Name:	MAXIM, JAMES	
Address:	925 HUNT ROAD	
City-St-Zip:	BROOMALL, PA 19008	
Title:	SD	( ) Delete
Name:	BANKS, ROBERT	
Address:	34 HORSESHOE LANE	
City-St-Zip:	NEWTON SQUARE, PA 19073	
Title:	D	( ) Delete
Name:	LAIRD, VIVIAN	
Address:	9990 56TH AVENUE NORTH	
City-St-Zip:	ST. PETERSBURG, FL 33708	
Title:	D	( ) Delete
Name:	STEELE, ANA	
Address:	2401 W. CYPRESS CREEK ROAD	
City-St-Zip:	FORT LAUDERDALE, FL 33309	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: HENRY STOUT PD 02/26/2008

Electronic Signature of Signing Officer or Director — Date