

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002327

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: SECOND CHANCE MINISTRY, INC.

## Current Principal Place of Business:

5026 PLYMOUTH STREET  
UNIT 7  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

## Current Mailing Address:

5026 PLYMOUTH STREET  
UNIT 7  
JACKSONVILLE, FL 32205

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

BROWN, TOMMY L  
5026 PLYMOUTH STREET  
UNIT 7  
JACKSONVILLE, FL 32205 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: DP ( ) Delete  
Name: BROWN, TOMMY L JR  
Address: 1572 GUARDIAN DRIVE.  
City-St-Zip: JACKSONVILLE, FL 32205

Title: DV ( ) Delete  
Name: BROWN, DESHAWN DER  
Address: 1572 GUARDIAN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: DST ( ) Delete  
Name: FIELDS, LISA L  
Address: P.O. BOX 77298  
City-St-Zip: JACKSONVILLE, FL 32226

## 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:

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: TOMMY L. BROWN

DP

04/30/2007

Electronic Signature of Signing Officer or Director

Date