

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002348

FILED
Mar 08, 2008
Secretary of State

Entity Name: THE POWER OF GOD MINISTRIES, INC.

Current Principal Place of Business:

3596 TAMIAMI TRAIL
UNIT 2L
PORT CHARLOTTE, FL 33952

Current Mailing Address:

P. O. BOX 494263
PORT CHARLOTTE, FL 33949

New Principal Place of Business:

3596 TAMIAMI TRAIL
UNIT 212
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 04-3750123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, AQUILLA
458 SANTIGUAY STREET
PUNTA GORDA, FL 33983 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: DIXON, AQUILLA
Address: 458 SANTIGUAY STREET
City-St-Zip: PUNTA GORDA, FL 33983

Title: VD () Delete
Name: DIXON, FAY B
Address: 458 SANTIGUAY STREET
City-St-Zip: PUNTA GORDA, FL 33983

Title: D () Delete
Name: LAIDLEY, RALSTON
Address: 4761 NW 18 CT
City-St-Zip: LAUDER HILL, FL 33313

Title: T () Delete
Name: RICHARDS, BRIDGET
Address: 1855 BRADDACK AVE
City-St-Zip: NORTH PORT, FL 34288

Title: T () Delete
Name: MORGAN, MYRTLE
Address: 25797 AYSAN DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: VAN ROSSUM, MICHELLE L
Address: 23078 BREWER AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33980

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: AQUILLA DIXON

PD

03/08/2008

Electronic Signature of Signing Officer or Director

Date