## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000002894

Entity Name: KEY TO TRUTH MINISTRIES, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4580 PORTAGE TRAIL
CAPE CANAVERAL, FL 32920

3825 SUNFLOWER COURT
MERRITT ISLAND, FL 32953

Current Mailing Address: New Mailing Address:

P.O.BOX 1156 CAPE CANAVERAL, FL 32920

FEI Number: 11-3673434 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SONS, BUCKLEY

4580 PORTAGE TRAIL

ODIANDO FL 20020 LIS

MEDDITI ISLAND FL 20053 LIS

ORLANDO, FL 32820 US MERRITT ISLAND, FL 32953 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: LINDA SONS 03/23/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 SONS, BUCKLEY M
 Name:
 SONS, LINDA M

 Address:
 4580 PORTAGE TRAIL
 Address:
 3825 SUNFLOWER CT.

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 MERRITT ISLAND, FL 32953

Title: D () Delete Title: D (X) Change () Addition

Name: SONS, LINDA Name: SONS, HEATHER

 Address:
 4580 PORTAGE TRAIL
 Address:
 8290 GATE PARKWAY - APT. 613

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 JACKSONVILLE, FL 32216

 Name:
 SONS, HEATHER
 Name:
 SONS, BRUCE

 Address:
 8290 GATE PARKWAY-APT.613
 Address:
 804 BRISTOL CT.

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:
 RICHARDSON, TX 75080

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: LINDA SONS D 03/23/2009