

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004434

FILED  
Jan 31, 2007  
Secretary of State

**Entity Name:** EVANGELISTIC MINISTRY PLANTING THE SEED INC.

**Current Principal Place of Business:**

1800 N.E. 8TH ROAD  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 830850  
OCALA, FL 34472

**New Mailing Address:**

1800 N.E. 8TH ROAD  
OCALA, FL 34470

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

FREYTES, NYDIA B  
9 ALMOND RD  
OCALA, FL 34472 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: FREYTES, NYDIA B  
Address: 9 ALMOND RD.  
City-St-Zip: OCALA, FL 34472

Title: DSV ( ) Delete  
Name: FREYTES, CARMEN A  
Address: PO BOX 830850  
City-St-Zip: OCALA, FL 34472

Title: DV ( ) Delete  
Name: LORENZO, ELIZABETH  
Address: PO BOX 830850  
City-St-Zip: OCALA, FL 34472

Title: DT ( ) Delete  
Name: SOLIS, GRISEL  
Address: PO BOX 830850  
City-St-Zip: OCALA, FL 34472

Title: D ( ) Delete  
Name: GONZALEZ, ABRAHAM JR  
Address: PO BOX 830850  
City-St-Zip: OCALA, FL 34472

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DSV (X) Change ( ) Addition  
Name: FREYTES, CARMEN A  
Address: 5471 S.E. 2ND ST.  
City-St-Zip: OCALA, FL 34471

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 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: NYDIA B. FREYTES

DP

01/31/2007

Electronic Signature of Signing Officer or Director

Date