

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006152

FILED
Apr 29, 2008
Secretary of State

Entity Name: BETHESDA PORCH MINISTRIES, INC.

Current Principal Place of Business:

400 S. FEDERAL HIGHWAY
SUITE 405
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

400 S. FEDERAL HIGHWAY
SUITE 405
BOYNTON BEACH, FL 33435 US

New Mailing Address:

5461 UNIVERSITY DRIVE
SUITE 104
CORAL SPRINGS, FL 33067 US

FEI Number: 35-2211166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'TOOLE, KIERAN J REV.
400 S. FEDERAL HIGHWAY
SUITE 405
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

O'TOOLE, KIERAN J REV.
5461 UNIVERSITY DRIVE
SUITE 104
CORAL SPRINGS, FL 33067 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:

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: O'TOOLE, KIERAN J REV.
Address: 400 S. FEDERAL HIGHWAY, SUITE 405
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: DVP () Delete
Name: O'TOOLE, LISA M
Address: 400 S. FEDERAL HIGHWAY, SUITE 405
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: DST () Delete
Name: PERRY, JOHN S JR.
Address: 128 INDIAN MOUND DRIVE
City-St-Zip: WELAKA, FL 32193 US

Title: D (X) Delete
Name: DAY, JOHN REV.
Address: RR # 1 1924 SHERKSON ROAD
City-St-Zip: RIDGEWAY, ON LOS1NO CA

Title: D (X) Delete
Name: WESSELLS, JOHN REV.
Address: 390 MAIN STREET
City-St-Zip: OTEGO, FL 13825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: DAY, JOHN REV.
Address: RR # 1 1924 SHERKSON ROAD
City-St-Zip: RIDGEWAY, ON LOS1NO CA

Title: DST (X) Change () Addition
Name: WESSELLS, JOHN REV.
Address: 390 MAIN STREET
City-St-Zip: OTEGO, NY 13825 US

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: KIERAN J. O'TOOLE

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date