

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000007320

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** DAVE THOMPSON MINISTRIES, INC.

**Current Principal Place of Business:**

20317 DALEWOOD RD  
NORTH FORT MYERS, FL 33917 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 452  
FORT MYERS, FL 33902 US

**New Mailing Address:**

**FEI Number:** 80-0067186

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, DAVID L REV.  
20317 DALEWOOD RD  
NORTH FORT MYERS, FL 33917 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:** PRES  
**Name:** THOMPSON, DAVID L REV.  
**Address:** 20317 DALEWOOD RD  
**City-St-Zip:** NORTH FORT MYERS, FL 33917 US

**Title:** S/TR  
**Name:** THOMPSON, TAMERA J  
**Address:** 20317 DALEWOOD RD  
**City-St-Zip:** NORTH FORT MYERS, FL 33917 US

**Title:** DIR  
**Name:** MARCHESSEAU, DOREENE  
**Address:** 524 BRIGHAM ST  
**City-St-Zip:** MARLBOROUGH, MA 01752 US

**Title:** DIR  
**Name:** WHITE, MALCOLM  
**Address:** 7625 SW CANYON RD  
**City-St-Zip:** PORTLAND, OR 97225 US

I hereby 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 all other like empowered.

**SIGNATURE:** DAVID L THOMPSON

PRES

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date