2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)** 

## FILED May 09, 2007 8:00 am Secretary of State DQCUMENT # N03000007563 1. Entity Name 05-09-2007 90115 003 \*\*\*\*70.00 UNITED MINISTRIES, INC. Principal Place of Business Mailing Address 707 59TH TERR E BRADENTON FL 34203 707 59TH TERR E BRADENTON FL 34203 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State Applied For City & State 4. FEI Number 73-1678161 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DAVIS, JACKIE L SR. Street Address (P.O. Box Number is Not Acceptable) 707 59TH TERR E BRADENTON FL 34203 ---8. The above named ontity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of ogistored agent. 03-12-07 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when revisitating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. lice president 11111 Delete HIII Stanford Perkins NAMI PERKINS, STAPORD NAMI STREET ADORESS STREET LADDRESS 5TH AVE ST 1348 32nd St. Sarasota CHY ST ZIP SARASOTA FL 34234 CHY ST ZIP F1034234 President Ш TITLE NAME DAVIS, JACKIE L SR NAMI LOUIS T. 309 16+H St., West STREET ADDRESS STREET ADDRESS 707 59TH TERRACE E CITY ST ZIP **BRADENTON FL 34203** CITY ST 7IP PAI ME 440, FIA. 34 221 JILLE Secretary NAMI DAVIS, JACKIE L SR. NAM 5. Davis. -SIBI E-FADORESS 707 591H TERRE SINCETADO CITY ST-7IP CITY ST ZIP **BRADENTON FL 34203** ш Delete reasur NAMI SIMON, LOUIS T STREET ADDRESS STREET ADDRESS 309 16TH ST W CITY ST ZIP CITY ST ZIP PALMETTO FL 34221 Delete ш HILE NAME NAMI STREET ADDRESS STREET ADORESS CITY-ST-ZIP CHY-ST-ZIP ши Change Addition DHE Delete NAME NAME. STREET ADDRESS STREET LADDRESS CHY-ST-ZIP CITY ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 Irustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with, an address, with all other like empowered.

ING OFFICER OR DIRECTOR